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ABSTRACT

This is a report on the first national examination of the effects of the Indian Child Welfare Act (Public Law 95-608), enacted in 1978. The study examines the prevalence of Native American children in substitute care and the implementation of the act and portions of the Adoption Assistance and Child Welfare Act of 1980 as they affect Indian children and families. The study addresses questions concerning: numbers and characteristics of Indian children in substitute care, the nature and quality of services available to the children and to families, how long the children stay in substitute care, programs' current and projected needs, and resources available to agencies and tribes. The report concludes that there has been progress in implementing the act, but that federal efforts to communicate standards and monitor compliance have been limited. The act has not reduced the flow of Indian children into substitute care. Case records indicate tribal programs were doing a creditable job of following good casework practice, particularly noteworthy in light of inadequate funding. Funding for tribal child welfare programs often comes from a hodge-podge of sources that requires tribes to scramble and to compete for small and unreliable grants, making continuity of service nearly impossible. Off-reservation Indian-operated programs are seen as important service resources for urban Indian families. Such programs also offer foster care and placement while linking public agencies and tribes. Data suggest permanency planning in Bureau of Indian Affairs agencies is not being practiced as well as in other programs. This report contains 13 references and numerous tables. (TES)

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INDIAN CHILD WELFARE

A STATUS REPORT

March 3, 1849

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INDIAN CHILD WELFARE: A STATUS REPORT

Final Report of the Survey of Indian Child Welfare and Implementation of the Indian Child Welfare Act and Section 428 of the Adoption Assistance and Child Welfare Act of 1980

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Other staff of the Administration for Children, Youth and Families made significant contributions at several stages of the project. Dr. Charles Gershenson provided wise counsel in the design, instrument development and report preparation tasks. Phyllis Nophlin and Cecelia Sudia provided useful background information and feedback on a number of issues. Esther Kresh and Alice Fusillo guided the project during its early, conceptual months.

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During the early stages of the study, a panel of experts in Indian child welfare was convened to help identify issues that should be addressed and to advise on an appropriate study design. Members of the advisory panel were Terry Cross, Dr. Marlene Echohawk, Judy Jordan, Robert Lewis, Dr. Anne Medicine, Dr. John Red Horse, and Cathy Wilson (ex officio). Because of their input, both the scope and design of the study were amended and improved.

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The computer-generated tables in Chapter 3 of the report were produced by Simon Shieh. Mary Lou Licwinko and Theresa Taylor provided writing assistance for the final report. Lisa O'Rourke's editing skills clarified many sections of the draft. Cary Prince assisted with the proofreading task, and Agnes Hassan and Maurice Talven assisted with the details of final production. Finally, we are most appreciative of the patience and dedication of word processing supervisor Deborah Willingham and her staff, Linda Williams and Ruth Steenburg.

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Indian Child Welfare: A Status Report

EXECUTIVE SUMMARY

Indian Child Welfare: A Status Report, is the report on the first systematic national examination of the effects of the Indian Child Welfare Act (Public Law 95-608) enacted by Congress in 1978. Commissioned by the Administration for Children, Youth and Families and the Bureau of Indian Affairs, the study examined the prevalence of Native American children in substitute care and the implementation of the Indian Child Welfare Act and portions of the Adoption Assistance and Child Welfare Act of 1980 as they affect Indian children and families. The study was conducted by CSR, Incorporated and its subcontractor, Three Feathers Associates.

BACKGROUND

Passage of the Indian Child Welfare Act was prompted by deep concern among Indians and child welfare professionals about the historical experience of American Indians and Alaska Natives with the country's child welfare system. Causes for this concern included:

- the disproportionately large number of Indian children who were being removed from their families;
- the frequency with which these children were placed in non-Indian substitute care and adoptive settings;
- a failure by public agencies to consider legitimate cultural differences when dealing with Indian families; and
- a severe lack of service to the Indian population.

To address this situation, Congress enacted the Indian Child Welfare Act of 1978. The Act:

- removes sole authority for the protection of Indian children and the delivery of child welfare services from the States;
- re-establishes tribal authority to accept or reject jurisdiction over Indian children living off of the reservation;
- requires State courts and public child welfare agencies to follow specific procedural, evidentiary, dispositional and other requirements when considering substitute care placement or termination of parental rights for Indian children;

- provides for intergovernmental agreements for child care services; and
- authorizes grants for comprehensive child and family service programs operated by tribes and off-reservation Indian organizations.

In 1980, Congress passed the Adoption Assistance and Child Welfare Act (Public Law 96-272). Provisions of this law regarding child welfare casework practices apply to all children served by public child welfare agencies. The law also provides, in Section 428, that Title IV-B grants for child welfare services may be made directly to Indian tribes.

In combination, the Indian Child Welfare Act and the Adoption Assistance and Child Welfare Act provide a number of safeguards and procedures to ensure that Indian children are not separated from their families and the jurisdiction of their tribes unnecessarily, and that they receive child welfare services focused on achieving permanency.

QUESTIONS ADDRESSED BY THIS STUDY

To assess the extent to which the Indian Child Welfare Act and the Adoption Assistance and Child Welfare Act are being implemented with respect to Indian children and families, this study addressed the following questions.

1. What is the prevalence and flow of Indian children in substitute care? What are the characteristics of these children and their placements? How does the current situation compare to previous points in time? To the general substitute care population?

2. To what extent are the minimum Federal standards for removal and placement of Indian children, as specified in the Indian Child Welfare Act, being followed? What factors are promoting and undermining full implementation of these standards?

3. What services are provided to Indian families whose children are in substitute care? How uniformly are the casework protections and practices prescribed in the Adoption Assistance and Child Welfare Act applied to Indian cases?

4. How long do Indian children stay in substitute care? What are the outcomes of their cases?

5. What resources, including funds, training, and technical assistance, are available to tribes to operate child welfare programs? What types of programs are operated by tribes and Indian-run organizations that receive Federal and other assistance? What factors are supporting and inhibiting the delivery of services by these programs? What are the programs' current and projected needs?

METHODOLOGY

The study of Indian child welfare had two parts:

- a nationwide survey of State, tribal, Bureau of Indian Affairs and off-reservation Indian-operated child welfare programs regarding the number and flow of Indian children in substitute care; and
- a field study of public, tribal, BIA and off-reservation program child welfare practices affecting Indian children in Arizona, Minnesota, Oklahoma and South Dakota.

FINDINGS

Study findings related to the five general research questions are summarized here.

1. **What is the prevalence and flow of Indian children in substitute care? What are the characteristics of these children and their placements? How does the current situation compare to previous points in time? To the general substitute care population?**

The nationwide mail survey of programs providing substitute care services for Indian children and families provides information including the following.

- There were 9,005 Native American children in substitute care on June 30, 1986, under the supervision of public agencies, tribes, BIA agencies, and off-reservation Indian programs. Of these, 52 percent were served by public programs, 35 percent by tribes, 9 percent by the BIA, and 5 percent by off-reservation programs. (Numbers are rounded.)
- Indian children make up 0.9 percent of the total child population but represent 3.1 percent of the total substitute care population. They are placed in substitute care at a rate that is 3.6 times greater than the rate for non-Indian children.
- Over 9,300 Indian children entered care during 1986, while only 6,258 left care.
- The number of Indian children in care has risen from about 7,200 in the early 1980s to 9,005 in 1986. In contrast, there has been a decrease in the number of children of all races in substitute care during that time period.
- Native American children in care are younger than the overall substitute care population. The median age is 9.9 years for Native American children, compared to 12.6 years for all children.

- o Seventy-seven percent of Indian foster children live in family settings (related or unrelated foster homes and unfinalized adoptive homes), while ten percent reside in institutions. These percentages are similar to those for foster children of all races.

- o Of the Indian children in foster homes, 63 percent are in homes in which at least one parent is Indian. Indian foster children are most likely to be in Indian homes if they are in tribal, BIA or off-reservation care and least likely if in public care.

- o Sixty-five percent of the Indian children in substitute care have a case goal that would place them in a family setting (return home, relative placement, guardianship, or adoption). Indian children are slightly more likely than all foster children to have a goal of return home or relative placement (56 vs. 51 percent) and less likely to have a goal of adoption (9 vs. 14 percent).

2. **To what extent are the minimum Federal standards for removal and placement of Indian children, as specified in the Indian Child Welfare Act, being followed? What factors are promoting and undermining full implementation of these standards?**

The Indian Child Welfare Act (ICWA) establishes requirements for State courts and public child welfare agencies that are considering placing an Indian child in substitute care or terminating parental rights to an Indian child. Interview and case record data from the 4-state field study provide indications of the extent to which these requirements are being implemented.

- o According to the ICWA, parents and tribes are to be notified when an Indian child is at risk of being removed from the home. In the public program case records reviewed, between 65 and 70 percent had some evidence that parents had been notified of the proceedings. About 80 percent of these records contained evidence of the tribe's notification.

- o Tribes have the right to assume jurisdiction over Indian children involved in State court child custody proceedings if they wish. Case record data suggest that requests for transfer of cases from State to tribal jurisdiction are honored in the majority of cases. Some requests apparently are denied because of socioeconomic conditions on reservations and perceptions of the adequacy of tribal social services or judicial systems, which is contrary to the BIA's Guidelines for States Courts for implementing the ICWA.

- o The ICWA specifies that a child cannot be removed from the home unless it is demonstrated that active efforts have been made to provide services designed to prevent removal. However, preventive efforts were documented in only 41 percent of the case records of Indian children in public care. These efforts usually involved counseling by the caseworker.

- The ICWA requires testimony from expert witnesses in substitute care placement and termination of parental rights (TPR) cases. This requirement had been met in the limited number of recent TPR cases heard by the State court judges who were interviewed. In substitute care cases, however, the proportion of each judge's recent cases in which expert witnesses had appeared ranged from none to all.

- The ICWA gives priority for substitute care placements to relatives or tribally approved foster homes. In the field study, 47 percent of children in public care were placed in relative or Indian non-relative placements.

- The ICWA also prescribes preferences for adoptive placements that give priority to placement with relatives, other members of the tribe, or Indian families from other tribes. In the field study, adherence appears to be fairly high, although the number of cases is very small.

- Factors that promote implementation of the Indian Child Welfare Act, in the opinion of public and tribal officials, include:

    - Passage of a State Indian child welfare law that makes the Federal law more explicit and reinforces compliance by State courts and public agencies.

    - Hiring of Indian staff members in State and local public agencies to help inform policy decisions and strengthen casework practices related to Indian families.

    - State-Tribal agreements that provide support for substitute care placements and for child welfare services.

    - Judges' education on and awareness of the Act.

    - Cooperative relationships between public agencies and Indian tribes and organizations.

    - Training and technical assistance to help develop tribal child welfare services.

- Factors that respondents believe deter or undermine implementation of the Act include:

    - Unfamiliarity with or resistance to the Act.

    - Lack of experience in working with tribes.

    - Turnover of public agency staff.

    - Concern about tribal accountability for providing services and caring for children.

- Lack of sufficient funding for tribal child welfare services and proceedings.

- Absence of tribal courts with the authority to assume jurisdiction over proceedings involving tribe members.

3. **What services are provided to Indian families whose children are in substitute care? How uniformly are the casework protections and practices prescribed in the Adoption Assistance and Child Welfare Act applied to Indian cases?**

Field study interviews and case record reviews investigated the staffing and services of public, tribal, BIA and off-reservation child welfare programs, and the adherence of the first three types of programs to sound casework practices such as those specified in the Adoption Assistance and Child Welfare Act.

- Public programs provide the standard range of child welfare services that are available to all families. Because of funding limitations, the range of core services provided directly by tribal, BIA and off-reservation programs is more limited. Other services are provided through frequent referrals.

- The proportion of staff with a Bachelor's or Master's degree in social work is higher in tribal programs than in public programs visited for the study. On the other hand, tribal staff have fewer average years of experience in child welfare compared to staff in the other types of programs. Eight of the twelve public programs have at least one Native American staff member.

- Recruitment of Indian homes poses difficulties for agencies across all types of programs. Except for agencies located on reservations, public programs have very few Indian foster families. State and local agency recruitment efforts range from nothing to multi-strategy campaigns. There has been limited exploration of outreach methods that build on Indian norms and traditions.

- Over 80 percent of the children whose case records were reviewed for the field study were in foster homes. The others were in group settings.

- A case goal that will place the child in a permanent family setting (return home, relative placement, or adoption) was assigned to 75 percent of reviewed cases in public programs, compared to 70 percent of tribal cases and 31 percent of BIA cases.

- Written case plans appeared in the majority of public and tribal case records (74 and 65 percent, respectively), but in less than one-quarter (23 percent) of BIA case records. Few records contained plans that were signed by the parent (21, 12, and 0 percent, respectively).

- Among those case records with information on the last administrative or judicial review, 80 percent of the public and tribal cases and 55 percent of the BIA cases had been reviewed in the last six months, usually by the court.

4. **How long do Indian children stay in substitute care? What are the outcomes of their cases?**

Both the mail survey and case record data from the field study provide information on these measures of program effectiveness. Survey findings are the following.

- The median length of time in care is 12 to 23 months for public, tribal, and off-reservation programs and 36 to 59 months for BIA programs. The proportions of children in care for three years or more are 24 percent for public programs, 18 percent for tribal programs, 57 percent for BIA programs, and 34 percent for off-reservation programs.

- Outcomes for children discharged from care show family-based permanency (return home, relative placement, adoption, or guardianship) for 79 percent of the children. Children are more likely to be discharged to families if they are in off-reservation Indian center care (86 percent) or tribal care (83 percent) than in public (78 percent) or BIA care (72 percent).

5. **What resources, including funds, training, and technical assistance, are available to tribes to operate child welfare programs? What types of programs are operated by tribes and Indian-run organizations that receive Federal and other assistance? What factors are supporting and inhibiting the delivery of services by these programs? What are the programs' current and projected needs?**

Reviews of annual funding data of existing grant programs and interviews with public, tribal, BIA and off-reservation Indian center officials provide information concerning resources for Indian-operated child welfare services.

- Tribal child welfare programs rely most heavily on Federal monies available through "638" contracts and ICWA Title II grants. Title IV-E funds help support foster care payments for some tribes through agreements with States. In the field study sites, State funds or support in the form of access to services and provision of training and technical assistance have been made available to some tribes.

- Applicants compete against each other annually for the limited Title II funds available. There have been an average of 150 awards each year. About three-quarters have been to tribes; the remainder have been to off-reservation Indian centers. The average grant is around $55,000. Programs often have been funded one year but not the next, both because funds are lacking and because their score in the competitive award process is too low.

- Title IV-B grants, authorized in Section 428 of the Adoption Assistance and Child Welfare Act, have provided an average of about $7,000 per tribe to about 35 tribes per year.
- Off-reservation child and family service programs in the field study sites have been developed with the support of Title II grants. They are multi-purpose programs that provide a range of preventive, remedial, and advocacy services to Indian families, including families involved in public and tribal child welfare programs. As a function of their location in urban areas, they tend to have access to an established social services network in the community for referrals.
- Training and technical assistance resources include other Indian professionals in the community and in private organizations that specialize in child welfare matters (e.g., American Indian Law Center, Three Feathers Associates), State child welfare agencies, the BIA, and local university staff.
- Child protection, substitute care, pre-adoption and aftercare services are offered by all tribal programs, but the range of services is limited. Referrals to other social services are the norm. Availability of these services from tribal programs depends upon other resources the tribe has been able to marshall (e.g., grants for substance abuse treatment, physical health facilities, support services). The high caseloads carried by many tribal child welfare workers hamper efforts to deliver needed services to clients.
- Among the current and projected needs of tribal programs are family-based services, mental health and substance abuse counseling and treatment services, day care, youth/adolescent homes and services, and emergency shelters. More staff, training and technical assistance in preventive and protective services, and procedural manuals would be beneficial.
- In identifying their needs, off-reservation program respondents named services such as day care, early warning and crisis intervention programs, and family therapy by Indian professionals. They also spoke of legal service and child advocacy needs in child welfare matters.

CONCLUSIONS

There has been progress in implementing the Indian Child Welfare Act enacted in November 1978. In many localities, public agencies and State courts are making significant efforts to comply with the procedural, evidentiary, dispositional and other requirements of the ICWA. Some States have supported the intent of the law through the passage of State Indian child welfare legislation and the negotiation of State-Tribal agreements and service contracts.

However, Federal-level efforts to communicate performance standards and monitor or enforce compliance have been limited. As a result, implementation of the Act has been uneven across geographic areas and governmental levels, and with regard to specific provisions. In some localities, non-compliance is quite pronounced.

The Act has not reduced the flow of Indian children into substitute care. In fact, the number in care has increased by roughly 25 percent since the early 1980s. The greatest increase is occurring in tribally operated child welfare programs, with public programs actually showing a decrease of about 15 percent from 1980 to 1986.

The public agencies studied are providing Indian children with the permanency planning and case review safeguards required by Public Law 96-272. Some are making efforts to hire Native American staff. However, public agencies are failing to provide Indian placements for a significant number of Indian foster children.

Based on data from their case records, the tribal programs visited for this study are doing a very creditable job of following standards of good casework practice and achieving family-based permanency for out-of-home children. This is particularly noteworthy in light of the inadequate and unstable funding arrangements under which they work. The substantial increase in tribal substitute care caseloads nationally indicates a need for expanded preventive services to children whose needs currently cannot be met in their own homes because of a lack of such services.

Off-reservation Indian-operated programs are important service resources for urban Indian families. They perform well in the provision of permanency-based foster care services and the placement of Indian children in Indian foster homes. They also serve as valuable links between public agencies and tribes.

Mail survey and case record data suggest that permanency planning in BIA agencies is not being practiced as well as in other programs. Children in BIA care are less likely to have case plans and case reviews than in other programs. They remain in care longer and are less likely to be discharged to family settings. Given the severe understaffing that characterizes most BIA social service programs, the declining child welfare caseloads in these agencies is a beneficial trend for both clients and staff, and the effort to shift child welfare responsibilities from BIA agencies to tribal programs should continue.

With the exception of 638 contracts from the BIA, which generally continue from year to year, funding for tribal child welfare programs comes from a hodge-podge of sources that requires tribes to scramble and compete annually for small and unreliable grants. This funding pattern makes continuity in services nearly impossible and the delivery of the quality services observed in this study obtainable only through the professionalism and dedication of program staff. It also limits the provision of the comprehensive services needed to prevent placement and re-entry.

In conclusion, progress has been made. Indian children are being protected and served better than in the past, but Federal, State and local efforts still are needed to continue to improve the provision of child welfare services to Indian children and families.

INDIAN CHILD WELFARE:
A STATUS REPORT

Chapter 1

Introduction

In September 1985, the Administration for Children, Youth and Families and the Bureau of Indian Affairs commissioned a study of the prevalence of Indian children in substitute care and the implementation of the Indian Child Welfare Act and relevant portions of the Adoption Assistance and Child Welfare Act of 1980 as they affect Indian children and families. This is the first systematic national examination of the effects of the Indian Child Welfare Act enacted by Congress in 1978. The study was conducted by CSR, Incorporated and its subcontractor, Three Feathers Associates. Findings of the study are presented in this report.

The first section of this introductory chapter summarizes issues in the delivery of child welfare services to Indian children and families that prompted passage of the Indian Child Welfare Act. The second reviews the purposes and major provisions of that Act, and also identifies provisions of the Adoption Assistance and Child Welfare Act that affect the delivery of all child welfare services, including those for Indian children and families. The third section describes national goals for Indian child welfare implicit in these two laws and identifies policy issues and questions currently of interest. The fourth section summarizes the methodology of the Indian Child Welfare Study, and the final section outlines the organization of this report.

Issues Leading to Passage of the Indian Child Welfare Act

The Indian Child Welfare Act of 1978 (Public Law 95-608) was prompted by deep concern among Indians and child welfare professionals about the historica experience of American Indians and Alaska Natives with the country's child welfare system. Of particular concern were the large number--Congress termed it "an alarmingly high percentage"--of Indian children who were removed from their families, and the frequency with which the substitute care and adoptive settings into which these children were placed effectively cut them off from their culture and heritage.

Separation of Children from their Families and Heritage

For many decades, large proportions of Indian children--one frequently cited study estimates 25 to 35 percent (Association on American Indian Affairs 1976)--were removed from their families by public and private child welfare agencies and placed for adoption or in institutional or foster home settings. The rate at which Indian children were placed in substitute care was 10 to 20 times higher than the placement rate for non-Indian children in many states, and adoption rates for Indian children also significantly exceeded those for non-Indians in many locales. Many children placed in substitute care were never returned to their own homes. This large-scale intrusion of outside systems into Indian parent-child relationships was characterized at one time as "the destruction of the American Indian family" (Byler, 1976).

Not only were Indian children being taken from their families, they also were being placed in settings that discouraged their knowledge of and identity with their cultural heritage. In many Bureau of Indian Affairs boarding schools, which often were used as substitute care institutions, Indian children were forbidden to speak their native language or practice their own religion. Most Indian children who were placed in foster and adoptive homes over the years were placed in non-Indian settings. For example, a 1976 report indicated that in four states for which data were available, between 57 and 96.5 percent of Indian foster care children were in non-Indian homes (Bureau of Indian Affairs Task Force 4, 1976). In five states for which similar data were available regarding adoptions, between 75 and 97.5 percent of Indian children adopted in the mid-1970s had been adopted by non-Indian families (Association on American Indian Affairs, 1976). Data on Indian foster care and adoptive placements shortly before passage of the Indian Child Welfare Act are shown in Tables 1-1 and 1-2.

Confusion in Service Delivery

Disregard for the integrity of the Indian family and the rights of children to their own cultural heritage was only one of the problems that plagued Indian child welfare before the Indian Child Welfare Act was passed. In addition, the provision of child welfare services to Indian children and their families was complicated by multiple, overlapping and often unclear assignments of authority and responsibility between and among tribes, State programs and the Bureau of Indian Affairs. A landmark report by the Center for Social Research and Development at the University of Denver--Indian Child Welfare: A State-of-the-Field Study (1976)--documented many of the problems. Summarized here briefly, these issues are discussed more fully in Part II of this report.

The Social Security Act assigns responsibility for the administration of child welfare services to the States, who in turn are obligated to serve all children in need, including Indian children. At the same time, the protected sovereignty of Indian tribes generally precludes State jurisdiction on Indian lands. This means that State laws and court orders do not apply in those areas and public workers have no authority to enforce such laws or orders on Indian lands.

The configuration of State versus tribal jurisdiction varies from state to state, tribe to tribe and issue to issue, however. One of the reasons for the variability in State versus tribal jurisdiction is Public Law 280. Enacted in 1953 by the 83rd Congress (and thus sometimes referred to as P.L. 83-280), this law transferred jurisdiction over civil and criminal matters occurring on most of the Indian lands in five states from the tribes to the States. It also empowered other States to pass laws assuming jurisdiction on Indian lands. Eventually, 14 States had full or partial jurisdiction over some or all of the Indian territory within their boundaries. Where State jurisdiction included child welfare matters, State laws and court orders concerning child welfare

Table 1-1

Indian and Non-Indian Children in Foster Care, c. 1975

	Indian Children					
		in Foster Care				
State	Total Number Under 21[a]	Number[a]	Rate per 1000[a]	Percent in Non-Indian Placements[c]	Non-Indian Children Foster Care Rate per 1000[d]	Ratio of Rate for Indian Children to Rate for Non-Indian Children[b]
Alaska	28,334	393	13.9	e	4.6	3.0:1
Arizona	54,709	558	10.2	e	3.8	2.7:1
California	39,579	319	8.1	e	2.7	3.0:1
Idaho	3,808	296	77.7	e	12.1	6.4:1
Maine	1,084	82	75.6	64	4.0	19.1:1
Michigan	7,404	82	11.1	e	1.6	7.1:1
Minnesota	12,672	737	58.2	e	3.5	16.5:1
Montana	15,124	534	35.3	e	2.8	12.8:1
Nevada	3,739	79	21.1	e	3.0	7.0:1
New Mexico	41,316	287	6.9	e	2.9	2.4:1
New York	10,627	142	13.4	96.5	4.5	3.0:1
North Dakota	8,186	296	36.1	e	1.8	20.0:1
Oklahoma	45,489	337	7.4	e	1.8	4.1:1
Oregon	6,839	247	36.1	e	4.4	8.2:1
South Dakota	18,322	832	45.4	e	2.0	22.3:1
Utah	6,690	249	37.2	e	2.5	15.0:1
Washington	15,980	558	34.9	80	3.6	9.6:1
Wisconsin	10,176	545	53.6	e	4.0	13.5:1
Wyoming	2,832	98	34.6	57	3.3	10.4:1

[a] From Association on American Indian Affairs, Indian Child Welfare Statistical Survey, 1976.
[b] Calculated from AAIA data.
[c] From Bureau of Indian Affairs Task Force 4, Final Report to the American Indian Policy Commission, 1976.
[d] Calculated from Task Force 4 data.
[e] Data not available.

Table 1-2

Indian and Non-Indian Children in Adoptive Placements, c. 1975

	Indian Children					
		in Foster Care				
State	Total Number Under 21[a]	Number[a]	Rate per 1000[a]	Percent in Non-Indian Placements[c]	Non-Indian Children Adoption Rate per 1000[d]	Ratio of Rate for Indian Children to Rate for Non-Indian Children[b]
Alaska	28,334	957	33.8	93	7.4	4.6:1
Arizona	54,709	1,039	19.0	e	4.5	4.2:1
California	39,579	1,507	38.1	92.5	4.5	8.5:1
Michigan	7,404	912	123.2	e	33.0	3.7:1
Minnesota	12,672	1,594	125.8	97.5	32.1	3.9:1
Montana	15,124	541	35.8	87.0	6.9	5.2:1
North Dakota	8,186	269	32.9	75.0	11.6	2.8:1
Oklahoma	45,489	1,116	24.5	e	5.3	4.6:1
Oregon	6,839	402	58.8	e	52.1	1.1:1
South Dakota	18,322	1,019	55.6	e	30.9	1.8:1
Utah	6,690	328	49.0	e	14.6	3.4:1
Washington	15,980	740	46.3	e	2.5	18.8:1
Wisconsin	10,176	733	72.0	e	4.0	18.0:1

[a] From Association on American Indian Affairs, Indian Child Welfare Statistical Survey, 1976.
[b] Calculated from AAIA data.
[c] From Bureau of Indian Affairs Task Force 4, Final Report to the American Indian Policy Commission, 1976.
[d] Calculated from Task Force 4 data.
[e] Data not available.

superceded any tribal regulations and public officials had the same authority on Indian lands as they did in the rest of the state.

Further complicating the situation was the fact that the Bureau of Indian Affairs is responsible for assuring that child welfare services are available to members of Federally recognized tribes for whom such services are not otherwise accessible. Particularly in states where public child welfare programs had not extended services to on-reservation Indians, BIA programs had developed to fill the void. In the meantime, some tribes had been operating their own child welfare programs with Federal (and occasionally State) funds, while private agencies in various locations included or focused on Indian children in their adoption and foster care efforts.

By the mid-1970s, child welfare services for Indians were a patchwork of programs with contentious overlaps, many gaps, and a history of disrupted families and culturally displaced children. The confusion regarding responsibility and jurisdiction for delivery of child welfare services to Indian children and families had resulted in pronounced underservice to this population. Also at issue were the frequent disregard of tribal jurisdiction over tribal children by public agencies and State courts, and the failure of non-Native programs and workers to consider legitimate cultural differences when intervening in or rendering services to Native families. To address the key problems that had contributed to this situation, Congress enacted the Indian Child Welfare Act of 1978.

Federal Child Welfare Legislation Affecting Indian Child Welfare Services

Two Federal laws--the Indian Child Welfare Act and the Adoption Assistance and Child Welfare Act--affect child welfare services provided to Indian children and families. Both laws are discussed briefly in the following paragraphs.

Indian Child Welfare Act of 1978

The Indian Child Welfare Act of 1978 (Public Law 95-608) is the most significant piece of legislation affecting American Indian families passed by the United States Congress. The Act, which requires the interaction of Tribal, State and Federal governments relative to Indian children, removes sole authority for the protection of children and the delivery of child welfare services from the States and re-establishes tribal authority to accept or reject jurisdiction. Tribes now have the right and responsibility to establish and maintain comprehensive family and child care services programs.

In cases in which proceedings for substitute care placement or termination of parental rights are conducted in State courts, the Act specifies a number of procedural, evidentiary, dispositional and other requirements designed to protect Indian parental rights and safeguard a child's right to tribal affiliation. The Act also provides for intergovernmental agreements for child care services.

Title I of the Act affirms that tribal courts have exclusive jurisdiction over custody proceedings involving children who are residents of or are domiciled on reservations. The Act further requires that State courts must transfer custody proceedings involving Indian children domiciled off reservation to tribal jurisdiction if the parents, Indian custodian, or tribe so request. An exception to this may occur if the State court finds good cause not to transfer jurisdiction.

Before any custody proceeding involving an Indian child is held in a State court, notice must be given to the parent or Indian custodian and the tribe. Each party has the right to examine all documents filed with the court, and the child's custodian and the tribe have the right to intervene at any point in the proceeding.

Recognizing the need to prevent further erosion of the Indian family structure and thus protect the best interests of Indian children, the Act sets forth standards and procedures to protect the rights of parents and Indian custodians in State courts. Additionally, the Act provides that any party seeking foster care placement of an Indian child or termination of parental rights to an Indian child must first satisfy the court that "active efforts have been made to provide remedial services and rehabilitative programs designed to prevent the breakup of the Indian family and that these services have proved unsuccessful".

The Act sets forth evidentiary requirements. Under Section 102(e), no foster care placement may be ordered unless the party seeking such a placement presents clear and convincing evidence, supported by qualified expert witnesses, that serious emotional or physical damage to the child will likely result if such a placement is not ordered. For termination of parental rights, an even more stringent standard of evidence beyond a reasonable doubt is required.

If evidentiary standards are met and a State court orders that an Indian child be removed from the home, the Act establishes an order of preference for the foster care or adoptive placement. Among the most preferred options are extended family, other families from the child's tribe or a placement approval by the tribe, and Indian families from other tribes.

Title II of the Indian Child Welfare Act provides for the establishment of comprehensive child and family services for both on-reservation and off-reservation Indians. This section further authorizes monies for the preparation and implementation of child welfare codes that may include licensing systems and regulations for Indian foster care and adoption. It also provides for the employment of trained personnel to aid tribal courts in disposing of child welfare matters.

Adoption Assistance and Child Welfare Act of 1980

In the mid- and late-1970s, public and Congressional concern about the status of the nation's child welfare system was not limited to services for Indian children. In June of 1980, the Adoption Assistance and Child Welfare

Act of 1980 (Public Law 96-272) was passed. This bill, also a result of public concern and advocacy by a spectrum of organizations, provided a series of "carrot-and-stick" incentives for states to remedy many of the problems of their child welfare systems.

The law mandates services designed to prevent placement and reunify families. It also requires parent involvement in developing written case plans and calls for establishment of case review systems. The required family reunification services can include emergency services and shelters, day care, respite care, homemakers, and counseling. Preventive services, which are required once the appropriation under Title IV-B passes $266 million, can include these same family support efforts.

The Adoption Assistance and Child Welfare Act removes fiscal disincentives to returning children home by limiting foster care maintenance payments that are related to full funding of child welfare services provisions. It also provides incentives for establishing inventories of children in care and statewide information systems to reduce the potential of children being lost in care.

The case review systems required by the law must include semi-annual review by a court or administrative body to determine the continuing necessity for and appropriateness of the placement, the extent of compliance with the case plan, and the extent of progress made toward alleviating or mitigating the causes necessitating placement in foster care; and to project a likely date for return home, adoption, or placement with a legal guardian. In addition to the 6-month reviews, dispositional review hearings must be held within 18 months after placement to determine the child's future status. All reviews must be open to parents.

The Adoption Assistance and Child Welfare Act also contains provisions pertaining specifically to child welfare services for Indian children. Section 428 provides that Title IV-B grants for child welfare services may be made directly to Indian tribes in states that have their child welfare services plans approved. The amount of a tribe's grant is considered to be part of the allotment for the state in which the tribe is located.

Indian Child Welfare: Goals and Policy Questions

When considered together, the Indian Child Welfare Act and the Adoption Assistance and Child Welfare Act suggest the following goals for Indian child welfare.

1. Prevent the separation of Indian children from their families when possible.

2. When preventive efforts fail, recognize that tribes have jurisdiction over reservation children. For off-reservation children, upon

petition by the child's parent or tribe, transfer custody proceedings to the jurisdiction of the tribe unless either parent objects or the tribe declines.

3. If jurisdiction remains with the State,
   a. adhere to Federal standards...
      (1) for the removal of Indian children from their families,
      (2) for the placement of these children in foster homes or other substitute care arrangements that reflect the unique values of Indian culture, and
      (3) for the provision and monitoring of substitute care services; and
   b. reunite the children with their families as soon as possible.
4. When reunification is not possible, provide permanent families through guardianships or adoptions in accordance with federal and tribal standards protecting Indian children's ties to their cultural heritage.
5. Provide assistance to Indian tribes and off-reservation Indian centers in the operation of child and family service programs.

The Indian Child Welfare Act has been in force for nine years; Public Law 96-272 has been in effect for seven years. At this time, there is interest in knowing the extent to which the goals for Indian child welfare are being met, and the policies, practices or activities needed to support greater movement toward those goals and ensure that Indians have full participation in the delivery of child welfare services.

To provide this information, the following policy questions need to be addressed.

1. What is the prevalence and flow of Indian children in substitute care? What are the characteristics of these children and their placements? How does the current situation compare to previous points in time? To the general substitute care population?
2. To what extent are the minimum Federal standards for removal and placement of Indian children, as specified in the Indian Child Welfare Act, being followed? What factors are promoting and undermining full implementation of these standards?
3. What services are provided to Indian families whose children are in substitute care? How uniformly are the casework protections and practices prescribed in the Adoption Assistance and Child Welfare Act applied to Indian cases?

4. How long do Indian children stay in substitute care? What are the outcomes of their cases?

5. What resources, including funds, training, and technical assistance, are available to tribes to operate child welfare programs? What types of programs are operated by tribes and Indian-run organizations that receive Federal and other assistance? What factors are supporting and inhibiting the delivery of services by these programs? What are the programs' current and projected needs?

It is these general policy questions that CSR and Three Feathers Associates were commissioned to address.

The Indian Child Welfare Study

The study of Indian child welfare issues reported in this document had two parts: a nationwide survey of all State-level, tribal, Bureau of Indian Affairs and off-reservation Indian-operated child welfare programs regarding the number and flow of Indian children in substitute care; and a four-state in-depth field study of child welfare practices affecting Indian children.

The purpose of the mail survey was to obtain a comprehensive picture of the number of American Indian and Alaska Native children in substitute care placements nationwide, the nature and length of those placements, and the settings to which children are discharged. The survey requested data on Indian substitute care caseloads and the characteristics of case flow during fiscal year 1986. It was sent to all State child welfare agencies; 193 American Indian and Alaska Native tribes, villages and consortia; 92 local Bureau of Indian Affairs agencies; and 39 off-reservation Indian centers that operate child welfare programs. More information on survey respondents and response rates is provided in Chapter 2.

The purpose of the field study was to obtain information about the processes by which P.L. 95-608 and P.L. 96-272 are being implemented, gaining perceptions and evaluations from people directly involved in different aspects of the process. The field study took place in four states that have large Indian populations: Arizona, Minnesota, Oklahoma and South Dakota.

Seven study sites were selected in each state. These included three local public child welfare programs, two tribal child welfare programs, one local Bureau of Indian Affairs child welfare program, and one Indian-operated off-reservation child and family services program. Data collection at each site involved interviews with child welfare administrators and juvenile court judges, and the review of case records of Indian children who have been in substitute care. Interviews also were conducted with two State-level child welfare officials in each of the four states. More information about the field study methodology is given in Chapter 4.

Organization of this Report

Findings of the Indian Child Welfare Study are presented in three parts in this report. Part I, "Native American Children in Substitute Care, 1986," reports the data from the nationwide mail survey. Part II, "Child Welfare Services for Native American Children and Families," presents findings from the four-state field study. Part III, "Summary and Recommendations," summarizes study findings in terms of the five major research questions posed earlier in this chapter and recommends actions to support further movement toward the goals for Indian child welfare.

A Note About Terminology

The Indian Child Welfare Act applies to American Indian and Alaska Native (i.e., Eskimo and Aleut) children who are members of or are eligible for membership in Federally recognized Indian tribes and Alaska Native villages. As used in this report, both the term "Native American" and the term "Indian" refer to American Indians, Eskimos and Aleuts.

PART I

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE, 1986

Chapter 2

Survey Methodology

The survey of Native American children in substitute care gathered data on the number and characteristics of this population in care on a single day (June 30, 1986) and on the flow of children entering and leaving the system over a year (July 1, 1985 to June 30, 1986).

In contrast to past research, this survey compiled data from four types of organizations: State-level public agencies; American Indian tribes, Alaska Native villages, and tribal or village consortia; Bureau of Indian Affairs (BIA) agencies; and private Indian-operated programs located off-reservation. Past surveys have obtained data only from State or local public agencies (Association on American Indian Affairs, 1976; Office for Civil Rights, 1981; VCIS [Voluntary Cooperative Information System], 1982-1984), from BIA agencies (BIA, 1983, 1985), or from very limited numbers of Indian tribes (American Indian Law Center, 1985).

Programs Surveyed

For this survey, the State child welfare agencies of all 50 states and the District of Columbia were surveyed for data on Native American children in public substitute care. To obtain information on children in the care of tribal and off-reservation programs, questionnaires were sent to 193 tribes, Alaska Native villages, or tribal consortia, and 39 off-reservation programs. Programs surveyed included those that had received Title II Indian Child Welfare grant funds in the past three years and others identified by the BIA Division of Social Services Central Office, BIA Area offices, or Three Feathers Associates (the subcontractor for this study) as operating child welfare programs. Ninty-two local BIA agencies received questionnaires also.

An intensive follow-up effort, including mail and telephone contacts, resulted in a response rate of 100 percent from State agencies and 78 percent overall. Additional data regarding 46 tribes, villages, or consortia and six BIA agencies that had not returned questionnaires were obtained from the BIA Division of Social Services. In most cases, these data show that the programs had no children in care. This additional information yielded an adjusted overall return rate of 91 percent. Data on programs surveyed and response rates are presented in Table 2-1.

Of all the programs surveyed, only 165, or 44 percent, had Indian children in substitute care. The tribes, villages or consortia, BIA agencies, and off-reservation Indian centers that reported children in care are listed in Appendix A.

Table 2-1

Programs Surveyed and Response Rates for Survey of Native American Children in Substitute Care

Type of Program	Number Surveyed	Number Forms Returned	Response Rate From Programs Surveyed	Additional No. for Which BIA Provided Information	Total Programs in Data File	Response Rate Including BIA-Provided Information	Number of Programs Reporting Indian Children in Care
State	51	51	100%	0	51	100%	43
Tribe/Village/ Consortium	193	132	68%	46	178	92%	95 (in 23 states)
Bureau of Indian Affairs	92	81	88%	6	87	95%	18 (in 9 states)
Off-Reservation	39	27	69%	0	27	69%	9 (in 8 states)
TOTALS	375	291	78%	52	343	91%	165

The survey obtained prevalence data from the States, tribes, BIA agencies and off-reservation programs on children in substitute care at a single point in time and over the course of the reporting year. It also obtained information on child age, reason for placement, length of placement, living arrangements, race or ethnicity of foster parents, permanency plan goal, outcomes for discharged children, children available for adoption, and number of subsidized adoptions. In addition, programs were asked a series of questions about how they counted children and defined terms. The findings from the survey are presented in Chapter 3.

Limitations of the Data

Some clarifications must be made about the data. In a few cases, programs provided data in categories that combine or overlap categories listed in the questionnaire. For example, five State agencies combined "abuse and neglect" as one category under "reason for placement" rather than providing data on abuse and neglect separately. In such instances, the reported numbers have been reallocated among questionnaire categories in proportion to the numbers reported for those categories by all other programs of that type. In the example above, the "abuse and neglect" numbers reported by those five State agencies were divided between the "abuse" and "neglect" categories based on the ratio of abuse to neglect in cases reported by the other public programs.

In some situations, States, tribes and/or off-reservation programs duplicated counts of children. This usually occurred where tribal or off-reservation programs operate under contract to the State or where public agency children are placed in tribal foster homes. Ten State programs indicated that their counts included some number of children in tribal or off-reservation program substitute care. Five of the ten identified the number of cases being reported that were in the care of those programs.

In one of these states--Minnesota--all of the children reported by tribal programs (N=118) also were reported by the State agency. Therefore, the Minnesota public program total in the first four tables in Chapter 3 was reduced by 118 children to eliminate the duplication. This adjustment could not be made in the other tables because there was no way to tell which data applied to which children.

In the remaining states where the State agency reported that some children counted in its questionnaire were in tribal or off-reservation care, and thus might be counted again in questionnaires from those programs, no adjustments could be made because there was no way to determine how many of the children who had the potential to be double counted actually had been reported by a second program. Based on State agency information, we estimate that between 221 and 569 children are counted twice.

It also is quite likely that some number of children were not counted. There are several reasons for this. First, no information was received on 15 tribes that currently or formerly operated child welfare programs, nor on

5 BIA agencies and 12 off-reservation programs that were surveyed. There also is a small possibility that some tribes provide substitute care through tribal funds only and so are unknown to the BIA as child welfare providers and thus were not surveyed. Surveys also were not sent to private child care agencies that receive no State funds. Such agencies, and especially church-related programs, have provided foster care to Indian children in the past.

Other children may have been missed because, in some states, the State child welfare information systems does not contain a separate race/ethnicity category for Native Americans, but groups them under "Other." To respond to the survey, State agencies in some of these states telephoned local programs to obtain the requested data. Others reported the number of Indian children in care as "unknown."

Finally, from evidence obtained in the field study, it is quite likely that an unknown but significant number of Indian children are not identified as Indian by public agency workers. Inquiries about a client's race or ethnic background are not standard procedure in most agencies. Therefore, workers are not likely to explore the possibility of Indian heritage unless there are distinctively Indian physical features, a traditional Indian surname, or a parent or relative who identifies the child as Indian.

While there is no way to know if the numbers of twice-counted and uncounted children are equal, the authors' impressions are that more Indian children are not counted than are counted twice.

Chapter 3

Native American Children in Substitute Care

The nationwide survey of Native American children in substitute care produced some dramatic new findings about the numbers, placement and care of these children. Most importantly, the survey revealed that, on the mid-1986 reporting date, 9,005 children were in substitute care under the supervision of public agencies, tribes, the Bureau of Indian Affairs (BIA) and off-reservation Indian programs. The most recent and widely-known figures prior to this survey--4,849 children--counted only children in State or local public agency care (Child Welfare Research Notes, 1984).

Organization of the Chapter

Findings from the survey are divided into four sections. The first section provides an overview and analysis of the total numbers counted and compares these data with those from two earlier studies. The second section presents characteristics of the children in substitute care and the settings in which they were living. The third section charts the flow of children through substitute care programs. The fourth section focuses on children who leave care through adoption.

A summary of survey findings on these topics is presented in the next three pages of this chapter. Following the summary is a more detailed discussion of the data.

Summary of Findings

This survey produced many new findings about Indian children in substitute care. Most importantly it identified 9,005 children in care, nearly twice as many as previously documented. While the majority of these children are in public care, 35 percent are cared for by tribes, 9 percent by the BIA and 5 percent by off-reservation programs.

Although the lack of comparable earlier data makes estimates tentative, it appears that the number of children in tribal and off-reservation care has increased dramatically since the early 1980s, the number served by BIA agencies has dropped by more than half during that time, and the number in public care has declined by about 15 percent.

A. Total Numbers, Rates, and Comparisons

Prevalence of Indian Children in Substitute Care

Indian children are greatly over-represented in substitute care in relation to their numbers in the overall child population. Nationally, Indian children are 0.9 percent of all American children aged 0-17, but comprise 3.1 percent of the children in substitute care. Further, when population size is taken into account, Indian children are placed in substitute care at a rate 3.6 times greater than the rate for non-Indian children.

Indian Substitute Care Population Over Time

The Indian substitute care population has grown from about 7,200 children in the early 1980's to 9,005 in 1986--an increase of 25 percent. Evidence from the survey that many more Indian children entered than left care in 1986 indicate that the number of children in care currently is increasing rapidly.

B. Characteristics of Children and their Placements

Age of Children

Native American foster children are younger than foster children of all ethnic groups, averaging 7-9 years compared to 12.3 years. Very few of the Indian children in care are infants, but 17 percent of the children are aged 4-6 years and 18 percent are 13-15 years old. Fewer Indian foster children are in the 13-17 year age group than is true for all foster children (32 percent compared to 44 percent). Tribes have more younger children than other programs.

Reason for Placement

Over three-fourths of the children were placed in care because of parental, rather than child, problems. Neglect and abuse account for 50 percent of placements, somewhat less than such placements for all children (56 percent). Substance abuse alone was the reason for placement in 14 percent of the cases.

Children placed because of their own problems were usually placed for status offenses. Only 3 percent were placed because of disabilities.

Length of Time in Care

The average length of time in care was 12-23 months, the same as that for children of all ethnic groups. Nearly 40 percent had been in care for more than 2 years, while 56 percent had been in care less than 2 years.

Tribes had larger proportions of children in care for the shortest periods of time, while BIA agencies had the largest percentage of children in care over 5 years.

Living Arrangements

Over three-fourths of Indian foster children in substitute care live in family settings--foster or unfinalized adoptive homes--but 10 percent reside in institutions. These percentages are similar to those for all children in substitute care. Children are most likely to live with foster families if they are in off-reservation care (94 percent) and least likely if they are in BIA care (59 percent).

Race of Foster Parents

Only 63 percent of Indian foster children are in foster homes in which at least one parent is Indian, and only 35 percent of the Indian children in public care are in Indian foster homes. The race of the foster parents was unknown in a quarter of the public agency cases for which data were reported. However, even tribes, BIA and off-reservation programs could not place all their children with Indian families, highlighting the shortage of Indian foster homes.

Case Goal

Only 65 percent of the Indian children had a case goal that would place them in a family setting (return home, guardianship, relative placement, or adoption). Just over half (56 percent) had a goal of return home/relative placement, compared to 51 percent of all foster children. Indian children were less likely to have a goal of adoption (9 percent) than all foster children (14 percent). They were also less likely to have a goal of emancipation (4 percent versus 9 percent).

C. Flow of Children through Substitute Care

Entry and Re-entry into Care

Over 9,300 Indian children entered substitute care during 1986, and 6,258 children left care. At this rate the number of Indian foster children will increase dramatically over the coming years.

Nineteen percent of the children entering care had been in substitute care previously, a slightly lower percentage than that for all children. Public programs had the highest recidivism rate, with 24 percent of the children re-entering care.

Case Outcomes

Overall, 79 percent of the children discharged from substitute care went into family settings (return home, relative placement, adoption, or guardianship). Children were most likely to be discharged to families if they were in off-reservation programs (86 percent) or tribal care (83 percent). Children were most likely to be emancipated from BIA care (14 percent). Placement with relatives was most likely in off-reservation and tribal care, but fairly rare in public or BIA care.

Only 1 percent of children in public care were transferred--a very low percentage considering Indian Child Welfare Act mandates for transfer of jurisdiction to tribes if requested.

D. Adoption-related Data

Only 340 Indian children (4 percent) were available for adoption on the reporting date, in contrast to 8 percent of foster children of all ethnic groups. During 1986, 369 Indian children were adopted; of these, 136 or 37 percent received adoption subsidies.

Conclusions

In conclusion, Indian children are a large and increasing substitute care population. While over a third of them are in tribal care, the majority are still in public care. Tribes keep children in care for shorter periods of time and place them with Indian families more frequently than other programs. The BIA has children in care for the longest periods, has the smallest percentage of children placed in family settings, and has the smallest percentage of children with the goal of returning home, although actual discharges to family settings are similar to other programs.

In comparison to foster children of all ethnic groups, Indians are greatly over-represented in the substitute care population. Indian children tend to be younger than foster children in general, but are about equally likely to be placed because of parental problems. They remain in care about the same length of time, have similar living arrangements, are slightly more likely to have a goal of return home or relative placement, and are more likely to be discharged to a family setting than foster children of all ethnicities. A smaller percentage of Indian children are available for adoption than all foster children.

Detailed Discussion of Findings

The preceding pages summarized findings of the nationwide mail survey of programs providing substitute care services for Native American children and families. The remainder of the chapter comprises a more detailed presentation of survey data.

A. Total Numbers, Rates, and Comparisons

Table 3-1 shows the distribution of the 9,005 Native American children in substitute care by state and type of program. A bare majority--4,643, or 52 percent--of the Indian children in care were in public care. Tribes were providing care for 3,156 children or 35 percent of the total, a much larger percentage than thought previously. The BIA had 797 children or 9 percent, and off-reservation programs were serving 409 children or 5 percent.

Ten central and western states account for over three-quarters of all the Indian children in care (see Figure 3-1). The states are: Arizona (12 percent), Alaska (11 percent), Montana (9 percent), Oklahoma (8 percent), South Dakota (7 percent), California (7 percent), Minnesota (6 percent), Washington (6 percent), North Dakota (5 percent) and Wisconsin (5 percent). All of these states have large Indian populations and/or contain major Indian reservations.

In seven of these ten states, the majority of Indian children in care are served by public child welfare agencies. Only in Arizona, Montana and North Dakota do tribes or the BIA provide care to the majority of Indian children who are in substitute care. In Arizona, 87 percent of the children are in tribal care, in North Dakota, 57 percent are in tribal care, and in Montana, 54 percent are in the care of the BIA.

In 24 of the remaining 41 states, public agencies provide care to the majority of Indian children in care. Thus, including the 7 states noted above, the majority of Indian children are in public care in 31 states. The majority of children are in tribal care in a total of seven states, including five states that do not have the largest Indian populations--Nevada, Mississippi, Alabama, Idaho and Colorado. In contrast to earlier times when BIA agencies were providing care for many children in many states, this survey found BIA agencies serving the majority of Indian children in care in only two states--Montana and Wyoming. Off-reservation programs provide care to the majority of Indian children only in New York and Illinois.

Prevalence of Indian Children in Substitute Care

Indian children are greatly over-represented in substitute care relative to their proportion in the overall child population (Table 3-2). Nationally, Indian children were 0.9 percent of all American children aged 0-17 in 1980. However, they comprised 3.1 percent of the children in substitute care in 1986, more than three and a half times their proportion in the general

Table 3-1

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE ON REPORTING DATE BY STATE AND TYPE OF PROGRAM, 1986 1/
(continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	6	0.1	6	100.0	-	-	-	-	-	-
Montana	799	8.9	243	30.4	114	14.3	432	54.1	10	1.3
Nebraska	123	1.4	119	96.7	0	0	4	3.3	-	-
Nevada	127	1.4	14	11.0	113	89.0	-	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	21	.2	21	100.0	-	-	-	-	-	-
New Mexico	241	2.7	123	51.0	58	24.1	60	24.9	-	-
New York 4/	115	1.3	47	40.9	-	-	-	-	68	59.1
North Carolina	154	1.7	148	96.1	6	3.9	-	-	-	-
North Dakota	482	5.4	172	35.7	273	56.6	37	7.7	-	-
Ohio	8	.1	8	100.0	-	-	-	-	-	-
Oklahoma	672	7.5	417	62.1	251	37.4	4	.6	-	-
Oregon	254	2.8	137	53.9	117	46.1	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	4	*	4	100.0	-	-	-	-	-	-
South Carolina	15	.2	15	100.0	-	-	-	-	-	-
South Dakota	664	7.4	340	51.2	206	31.0	118	17.8	-	-
Tennessee	0	0	0	-	-	-	-	-	-	-
Texas	20	.2	20	100.0	-	-	-	-	-	-
Utah	106	1.2	81	76.4	25	23.6	-	-	-	-
Vermont	4	*	4	100.0	-	-	-	-	-	-
Virginia	3	*	3	100.0	-	-	-	-	-	-
Washington	518	5.8	346	66.8	117	22.6	-	-	55	10.6
West Virginia	0	0	0	-	-	-	-	-	-	-
Wisconsin	432	4.8	228	52.8	154	35.6	-	-	50	11.6
Wyoming	85	.9	41	48.2	-	-	44	51.8	-	-

1/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

2/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona line. Approximately 200 of these children were initially taken into care in other states.

3/ Children reported by tribal programs in Minnesota also were reported by public programs. The figure given for public programs in this table therefore has been decreased by 118 to avoid double counting.

4/ Data for public programs in New York do not include children in New York City.

* Less than 0.05 percent.

Table 3-1

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE ON REPORTING DATE BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total	9,005	100.0	4,643	51.6	3,156	35.0	797	8.9	409	4.5
Alabama	17	.2	4	23.5	13	76.5	-	-	-	-
Alaska	981	10.9	794	80.9	187	19.1	-	-	-	-
Arizona 2/	1,082	12.0	40	3.7	938	86.7	97	9.0	7	.6
Arkansas	5	.1	5	100.0	-	-	-	-	-	-
California	587	6.5	455	77.5	105	17.9	-	-	27	4.6
Colorado	166	1.8	79	47.6	87	52.4	-	-	-	-
Connecticut	16	.2	16	100.0	-	-	-	-	-	-
Delaware	1	*	1	100.0	-	-	-	-	-	-
District of Columbia	0	0	0	-	-	-	-	-	-	-
Florida	17	.2	13	76.5	4	23.5	-	-	-	-
Georgia	6	.1	6	100.0	-	-	-	-	-	-
Hawaii	0	0	0	-	-	-	-	-	-	-
Idaho	77	.9	16	20.8	60	77.9	1	1.3	-	-
Illinois	178	2.0	54	30.3	-	-	-	-	124	69.7
Indiana	3	*	3	100.0	-	-	-	-	-	-
Iowa	58	.6	58	100.0	-	-	-	-	-	-
Kansas	60	.7	37	61.7	23	38.3	-	-	-	-
Kentucky	0	0	0	-	-	-	-	-	-	-
Louisiana	3	*	3	100.0	-	-	-	-	-	-
Maine	60	.7	35	58.3	25	41.7	-	-	-	-
Maryland	10	.1	10	100.0	-	-	-	-	-	-
Massachusetts	0	0	0	-	-	-	-	-	-	-
Michigan	172	1.9	85	49.4	19	11.0	-	-	68	39.5
Minnesota 3/	503	5.6	385	76.5	118	23.5	-	-	-	-
Mississippi	150	1.7	7	4.7	143	95.3	0	0	-	-

Figure 3-1

Distribution of Native American Substitute Care Cases, 1986

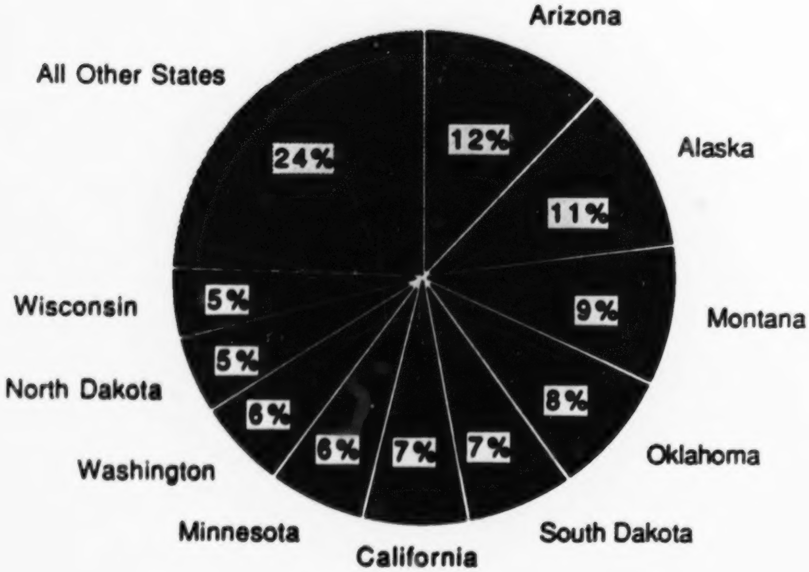

Table 3-2

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN 1980 TOTAL CHILD POPULATION AND IN 1986 SUBSTITUTE CARE POPULATION BY STATE

State	Children Ages 0-17, 1980 1/			Children in Substitute Care on Reporting Date, 1986 2/					
	Total, All Races	Native American		Public Programs Only			All Programs 3/		
		Number	Percent of Total	Total, All Races	Native American		Total, All Races	Native American	
					Number	Percent of Total		Number	Percent of Total
U.S. Total..........	63,754,960	555,713	0.9	286,627	4,643	1.6	290,989	9,005	3.1
Alabama.............	1,162,248	2,643	0.2	4,507	4	0.1	4,520	17	0.4
Alaska..............	130,745	26,942	20.6	1,526	794	52.0	1,713	981	57.3
Arizona.............	791,487	69,710	8.8	2,909	40	1.4	3,951	1,082	27.4
Arkansas............	671,374	2,994	0.5	1,212	5	0.4	1,212	5	0.4
California..........	6,388,958	67,425	1.1	42,977	455	1.1	43,109	587	1.4
Colorado............	808,813	6,547	0.8	4,393	79	1.8	4,480	166	3.7
Connecticut.........	822,919	1,390	0.2	5,842	16	0.3	5,842	16	0.3
Delaware............	166,595	346	0.2	788	1	0.1	788	1	0.1
District of Columbia	143,491	212	0.2	2,095	0	0.0	2,905	0	0.0
Florida.............	2,359,636	5,486	0.2	6,714	13	0.2	6,718	17	0.3
Georgia.............	1,646,130	2,206	0.1	8,813	6	0.1	8,813	6	0.1
Hawaii..............	275,583	814	0.3	1,064	0	0.0	1,064	0	0.0
Idaho...............	306,665	4,603	1.5	384	16	4.2	445	77	17.3
Illinois............	3,243,037	5,445	0.2	13,346	54	0.4	13,470	178	1.3
Indiana.............	1,618,318	2,504	0.2	5,213	3	0.1	5,213	3	0.1
Iowa................	825,873	2,279	0.3	3,763	58	1.5	3,763	58	1.5
Kansas..............	469,035	5,317	0.8	3,853	37	1.0	3,876	60	1.6
Kentucky............	1,082,730	1,015	0.1	4,467	0	0.0	4,467	0	0.0
Louisiana...........	1,330,468	4,594	0.4	7,293	3	0.0	7,293	3	0.0
Maine...............	321,378	1,719	0.5	1,916	35	1.8	1,941	60	3.1
Maryland............	1,167,530	2,676	0.2	5,412	10	0.2	5,412	10	0.2
Massachusetts.......	1,490,389	2,502	0.2	7,963	0	0.0	7,963	0	0.0
Michigan............	2,751,986	16,096	0.6	13,939	85	0.6	14,026	172	1.2
Minnesota...........	1,171,808	15,708	1.3	5,613	385	6.9	5,731	503	8.8
Mississippi.........	814,197	2,540	0.3	2,116	7	0.3	2,259	150	6.7

Table 3-2

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN 1980 TOTAL CHILD POPULATION AND IN 1986 SUBSTITUTE CARE POPULATION BY STATE

(continued)

State	Children Ages 0-17, 1980 1/			Children in Substitute Care on Reporting Date, 1986 2/					
	Total, All Races	Native American		Public Programs Only			All Programs 3/		
		Number	Percent of Total	Total, All Races	Native American		Total, All Races	Native American	
					Number	Percent of Total		Number	Percent of Total
Missouri	1,362,483	3,731	0.3	6,045	6	0.1	6,045	6	0.1
Montana	231,895	16,531	7.1	1,449	243	16.8	2,005	799	39.9
Nebraska	447,170	4,118	0.9	2,438	119	4.9	2,442	123	5.0
Nevada	215,799	4,968	2.3	1,126	14	1.2	1,239	127	10.3
New Hampshire	258,082	422	0.2	1,340	-	-	1,340	-	-
New Jersey	1,990,861	2,508	0.1	9,087	21	0.2	9,087	21	0.2
New Mexico	417,907	47,382	11.3	2,160	123	5.7	2,278	241	10.6
New York	4,687,863	13,478	0.3	25,758	47	0.2	25,826	115	0.5
North Carolina	1,657,735	25,095	1.5	6,256	148	2.4	6,262	154	2.5
North Dakota	190,991	9,660	5.1	587	172	29.3	897	482	53.7
Ohio	3,094,320	3,792	0.1	11,694	8	0.1	11,694	8	0.1
Oklahoma	854,884	66,143	7.7	2,942	417	14.2	3,197	672	21.0
Oregon	823,057	10,805	1.5	4,393	137	3.1	4,510	254	5.6
Pennsylvania	3,123,296	2,939	0.1	13,185	-	-	13,185	-	-
Rhode Island	242,851	1,095	0.4	2,085	4	0.2	2,085	4	0.2
South Carolina	941,966	2,011	0.2	3,642	15	0.4	3,642	15	0.4
South Dakota	205,606	21,948	10.7	564	340	60.3	888	664	74.8
Tennessee	1,298,560	1,350	0.1	4,706	0	0.0	4,706	0	0.0
Texas	4,306,106	11,964	0.3	5,255	20	0.4	5,255	20	0.4
Utah	540,105	9,470	1.8	1,765	81	4.6	1,790	106	5.9
Vermont	145,318	337	0.2	900	4	0.4	900	4	0.4
Virginia	1,474,334	2,550	0.2	5,810	3	0.1	5,810	3	0.1
Washington	1,139,360	23,952	2.1	6,374	346	5.4	6,546	518	7.9
West Virginia	559,636	434	0.1	3,206	0	0.0	3,206	0	0.0
Wisconsin	1,357,820	12,681	0.9	5,288	228	4.3	5,492	432	7.9
Wyoming	145,553	2,978	2.1	454	41	9.0	498	85	17.1

1/ Source: 1980 Census.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Combines all types of programs surveyed: Public, Tribal, BIA and Off-reservation.

population. In public substitute care programs they were over-represented by nearly two times their proportion in the population.

Native American children comprise more than one-quarter of the total substitute care population in five states: South Dakota (75 percent), Alaska (57 percent), North Dakota (54 percent), Montana (40 percent), and Arizona (27 percent).

Native American children are in substitute care at a rate that is 3.6 times higher than the rate for non-Indian children. As shown in Table 3-3, there are 16.2 Indian children in care for every 1,000 Indian children in the nation, while for non-Indian children, the rate is 4.5 children per 1,000. When only public programs are considered, the Indian prevalence rate is 1.9 times larger than the non-Indian rate.

Disproportionately high prevalence rates for Indian children relative to non-Indian children (Table 3-3) do not necessarily occur in states where the greatest percentages of children in care are Indian (Table 3-3). The greatest imbalance in prevalence rates is in South Dakota, where the rate in care for Indian children is 25 times greater than for non-Indian children. The imbalance also is pronounced in Mississippi (23:1), North Dakota (22:1), Idaho (14:1), and Wyoming (10:1). Note that the last columns in Table 3-3 are ratios of rates, not children.

Indian Substitute Care Population Over Time

Table 3-4 presents the number of Indian children in public substitute care over several years. In 1980, the Office for Civil Rights (OCR) of the U.S. Department of Health and Human Services (DHHS) conducted a survey of public agencies in all U.S. counties. That survey found 5,475 Indian children in public substitute care. Preliminary VCIS (Voluntary Cooperative Information System) data from 1985, provided by the Administration for Children, Youth and Families, DHHS, show 3,604 Indian children in public care, some under tribal organization supervision. The current study shows 4,643 children in public care.

The three totals are not completely comparable because, while the 1980 OCR data include the public child welfare programs in virtually all counties of the country, the 1985 VCIS is missing data from 12 states that failed to report. If the 1986 data from the current study were used for those states, an additional 1,424 children would be added to the 1985 VCIS number for a total of 5,028. Thus, it appears that the number of Indian children in public substitute care has been fairly constant between 1980 and 1986 and may even have been dropping slowly (from 5,475 to 5,028 to 4,643).

In 1980, most Indian children who were in substitute care were in public care. Most of the remainder probably were in BIA care, as many tribal programs were only beginning to be developed through contracts with the BIA. A 1983 BIA study found 1,714 children in BIA care. Adding 1,714 to the 1980 OCR public program figure yields a total of 7,189 children in the care of State and BIA agencies in the early 1980s.

Table 3-3

PREVALENCE RATES OF NATIVE AMERICAN AND NON-NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE IN 1986 PER 1,000 CHILDREN UNDER AGE 18 IN 1980 BY STATE

State	Children in Substitute Care on Reporting Date 1/						Ratio: Rate for Native American Children to Rate for Non-Native Children 2/	
	Native American Children				Non-Native American Children (Only in Public Programs)		Public Programs Only	All Programs
	Public Programs Only		All Programs 3/		Number in Care	Rate per 1,000 4/		
	Number in Care	Rate per 1,000 4/	Number in Care	Rate per 1,000 4/				
U.S. Total	4,643	8.4	9,005	16.2	281,984	4.5	1.9:1	3.6:1
Alabama	4	1.5	17	6.4	4,503	3.9	0.4:1	1.6:1
Alaska	794	29.5	981	36.4	732	7.1	4.2:1	5.1:1
Arizona 5/	40	0.6	1,082	15.5	2,869	4.0	0.2:1	3.9:1
Arkansas	5	1.7	5	1.7	1,207	1.8	0.9:1	0.9:1
California	455	6.7	587	8.7	42,522	6.7	1.0:1	1.3:1
Colorado	79	12.1	166	25.4	4,314	5.4	2.2:1	4.7:1
Connecticut	16	11.5	16	11.5	5,826	7.1	1.6:1	1.6:1
Delaware	1	2.9	1	2.9	787	4.7	0.6:1	0.6:1
District of Columbia	0	0.0	0	0.0	2,095	14.6	0.0:1	0.0:1
Florida	13	2.4	17	3.1	6,701	2.8	0.9:1	1.1:1
Georgia	6	2.7	6	2.7	8,807	5.4	0.5:1	0.5:1
Hawaii	0	0.0	0	0.0	1,064	3.9	0.0:1	0.0:1
Idaho	16	3.5	77	16.7	368	1.2	2.9:1	13.9:1
Illinois	54	9.9	178	32.7	13,292	4.1	2.4:1	8.0:1
Indiana	3	1.2	3	1.2	5,210	3.2	0.4:1	0.4:1
Iowa	58	25.4	58	25.4	3,705	4.5	5.6:1	5.6:1
Kansas	37	7.0	60	11.3	3,816	8.2	0.9:1	1.4:1
Kentucky	0	0.0	0	0.0	4,467	4.1	0.0:1	0.0:1
Louisiana	3	0.7	3	0.7	7,290	5.5	0.1:1	0.1:1
Maine	35	20.4	60	34.9	1,881	5.9	3.5:1	5.9:1
Maryland	10	3.7	10	3.7	5,402	4.6	0.8:1	0.8:1
Massachusetts	0	0.0	0	0.0	7,963	5.4	0.0:1	0.0:1
Michigan	85	5.3	172	10.7	13,854	5.1	1.0:1	2.1:1
Minnesota	385	24.5	503	32.0	5,228	4.5	5.4:1	7.1:1
Mississippi	7	2.8	150	59.1	2,109	2.6	1.1:1	22.7:1

Table 3-3

PREVALENCE RATES OF NATIVE AMERICAN AND NON-NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE IN 1986 PER 1,000 CHILDREN UNDER AGE 18 IN 1980 BY STATE

(continued)

State	Children in Substitute Care on Reporting Date 1/						Ratio: Rate for Native American Children to Rate for Non-Native Children 2/	
	Native American Children				Non-Native American Children (Only in Public Programs)		Public Programs Only	All Programs
	Public Programs Only		All Programs 3/					
	Number in Care	Rate per 1,000 4/	Number in Care	Rate per 1,000 4/	Number in Care	Rate per 1,000 4/		
Missouri	6	1.6	6	1.6	6,039	4.4	0.4:1	0.4:1
Montana	243	14.7	799	48.3	1,206	5.6	2.6:1	8.6:1
Nebraska	119	28.9	123	29.9	2,319	5.2	5.6:1	5.8:1
Nevada	14	2.8	127	25.6	1,112	5.3	0.5:1	4.8:1
New Hampshire	-	-	-	-	1,340	5.2	-:1	-:1
New Jersey	21	8.4	21	8.4	9,066	4.6	1.8:1	1.8:1
New Mexico	123	2.6	241	5.1	2,037	5.5	0.5:1	0.9:1
New York	47	3.5	115	8.5	25,711	5.5	0.6:1	1.6:1
North Carolina	148	5.9	154	6.1	6,108	3.6	1.7:1	1.7:1
North Dakota	172	17.8	482	49.9	415	2.3	7.7:1	21.7:1
Ohio	8	2.1	8	2.1	11,686	3.8	0.6:1	0.6:1
Oklahoma	417	6.3	672	10.2	2,525	3.2	2.0:1	3.2:1
Oregon	137	12.7	254	23.5	4,256	5.2	2.4:1	4.5:1
Pennsylvania	-	-	-	-	13,185	4.2	-:1	-:1
Rhode Island	4	3.7	4	3.7	2,081	8.6	0.4:1	0.4:1
South Carolina	15	7.5	15	7.5	3,627	3.9	1.9:1	1.9:1
South Dakota	340	15.5	664	30.3	224	1.2	12.9:1	25.2:1
Tennessee	0	0.0	0	0.0	4,706	3.6	0.0:1	0.0:1
Texas	20	1.7	20	1.7	5,235	1.2	1.4:1	1.4:1
Utah	81	8.6	106	11.2	1,684	3.2	2.7:1	3.5:1
Vermont	4	11.9	4	11.9	896	6.2	1.9:1	1.9:1
Virginia	3	1.2	3	1.2	5,807	3.9	0.3:1	0.3:1
Washington	346	14.4	518	21.6	6,028	5.4	2.7:1	4.0:1
West Virginia	0	0.0	0	0.0	3,206	5.7	0.0:1	0.0:1
Wisconsin	228	18.0	432	34.1	5,060	3.8	4.7:1	9.0:1
Wyoming	41	13.8	85	28.5	413	2.9	4.8:1	9.8:1

1/ For 78 percent of reporting programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

2/ Compares the prevalence rates for the two groups of children. For example, when all programs are considered, the rate of Native American children in substitute care in the U.S. is 3.6 times greater than the rate of non-Native American children in care. This means that, if the Native-American and non-Native American child populations were of equal size, the number of Native American children would 3.6 times larger than the number of non-Native American children in care.

3/ Combines all types of programs surveyed: Public, Tribal, BIA, and Off-reservation.

4/ Note that 1980 population data are used to compute prevalence rates. If 1986 population data were available, resulting rates usually would be somewhat smaller because of population growth. The decrease in prevalence rates generally would be greater for Native American children than for non-Native American children because birth rates are higher for Native Americans than for the rest of the population. However, factors such as interstate migration and foreign immigration would have widely varying impacts on data for individual states.

5/ All children under the jurisdiction of the Navajo Tribal Court are reported in the Arizona line. Approximately 200 of these children were initially taken into care in other states and may continue to reside there. If these children were omitted from the Arizona data, the prevalence rate for Native American children in all Arizona programs would be 12.7 per 1,000 and the Native:Non-Native ratio for all programs would be 3.1:1.

Table 3-4

NATIVE AMERICAN CHILDREN IN PUBLIC CARE: DATA FROM 1980, 1985 AND 1986, BY STATE

State	1980	1985	1986
U.S. Total	5,475	3,604	4,643
Alabama	11	6	4
Alaska	536		794
Arizona	184	127	40
Arkansas	6	5	5
California	447	485	455
Colorado	84	67	79
Connecticut	9	13	16
Delaware	0	1	1
District of Columbia	2	-	0
Florida	23	17	13
Georgia	7	14	6
Hawaii	4	1	0
Idaho	37	NA	16
Illinois	67	*	54
Indiana	19	9	3
Iowa	43	NA	58
Kansas	38	59	37
Kentucky	0	12	0
Louisiana	9	22	3
Maine	61	32 a	35
Maryland	16	6	10
Massachusetts	57	24	0
Michigan	119	*	85
Minnesota	708	503 b	385
Mississippi	21	7	7

Sources

1980: 1980 Children and Youth Referral Survey--Public Welfare and Social Service Agencies. DHHS Office for Civil Rights. September 1981.

1985: VCIS (Voluntary Cooperative Information System) Child Welfare Data, 1985. Raw Data Tables and Footnotes. American Public Welfare Association. February 1987.

1986: This report.

Table 3-4

NATIVE AMERICAN CHILDREN IN PUBLIC CARE: DATA FROM 1980, 1985 AND 1986, BY STATE
(continued)

State	1980	1985	1986
Missouri	18	6	6
Montana	190		243
Nebraska	156	110	119
Nevada	15	21	14
New Hampshire	3		0
New Jersey	3	15	21
New Mexico	135	144	123
New York	103	49	47
North Carolina	238	204	148
North Dakota	144		172
Ohio	22	5	8
Oklahoma	258	212	417
Oregon	202	89	137
Pennsylvania	9	*	0
Rhode Island	0	2 a	4
South Carolina	58	*	15
South Dakota	505	428 a	340
Tennessee	1	0	0
Texas	26	24	20
Utah	183	98	81
Vermont	3	15	4
Virginia	7	3	3
Washington	405	521 a	346
West Virginia	1	0	0
Wisconsin	243	248	228
Wyoming	39	NA	41

a. This figure includes the children who are under the supervision of Indian Tribal organizations/agencies.

b. All Indian children under the supervision of tribal organizations are included, except that at the Red Lake reservation there may be additional children placed by the tribal court under the supervision of the Indian tribal organization who are the financial responsibility of the BIA and therefore are not counted by a Minnesota county agency.

As the number of tribal programs expanded because of BIA contracts, and both tribal and off-reservation programs were funded by Title II grants under the Indian Child Welfare Act, the provision of services by these programs increased. As reported on page 3-1, the number of children in the care of these Indian-operated programs in 1986 was approaching 4,000. While their caseload has been increasing, the number of children in BIA care apparently has declined from 1,714 in 1983 to 797 in 1986.

It is our best estimate that the number of Indian children in substitute care in all types of programs has increased from about 7,200 in 1980-83 to the 9,000 found in this study--an increase of 25 percent. In contrast, the U.S. overall substitute care population decreased 13 percent between 1980 and 1985. Further confirmation that the Indian substitute care population is rising comes from data presented later in the chapter (Table 3-15) that show 3,000 more Indian children entering than leaving care in 1986.

B. Characteristics of Children and Their Placements

The second section of this chapter presents survey findings concerning the Native American children in substitute care on the reporting date. Described are children's ages, reasons for placement in care, length of time in care, substitute care settings, race of their foster parents for those in foster homes, and their case goals. Survey data on Native American children also are compared to 1984 data on children of all races in substitute care. The latter are taken from the Voluntary Cooperative Information System (VCIS) data for 1984.

Age of Children

As Table 3-5 shows, the median age category for Indian children in substitute care is 7-9 years. Fifty percent of the Indian children in care nationally are in this category or below it. These children are considerably younger than all American children in foster care, for whom the median age is 12.3 years (VCIS, 1984). This finding is consistent with the fact that the overall Indian population is younger than the general U.S. population.

Nationwide, very few Indian infants were in care on the reporting date--only 5 percent of the total Indian substitute care population. Children were fairly evenly distributed across the remaining age categories, with the exception of 17 percent in the 4-6 age group and 18 percent in the 13-15 age group. The bulge in the 13-15 age group is reflective of the national trend for children of all ethnic groups. However, only 32 percent of the Indian foster children are aged 13-17 compared to 44 percent of all foster children (VCIS, 1984), again reflecting the younger age characteristics of these children. Just over 3 percent of the children were over 18 years of age. These are probably handicapped individuals who will remain in child substitute care until age 21.

Table 3-5

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE OF CHILD AND TYPE OF PROGRAM, 1986 1,2/

Age of Child	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Less than 1 Year.........	318	4.5	160	4.2	108	5.0	29	4.2	21	5.2
1 - 3 Years............	1,037	14.8	512	13.6	356	16.5	87	12.6	82	20.5
4 - 6 Years............	1,186	16.9	612	16.2	379	17.6	114	16.5	81	20.2
7 - 9 Years............	969	13.8	485	12.9	312	14.5	91	13.2	81	20.2
10 - 12 Years............	973	13.9	542	14.4	285	13.2	92	13.3	54	13.5
13 - 15 Years............	1,285	18.3	683	18.1	427	19.8	120	17.3	55	13.7
16 - 17 Years............	951	13.6	618	16.4	222	10.3	95	13.7	16	4.0
18 Years or Older........	229	3.3	132	3.5	23	1.1	64	9.2	10	2.5
Age Unknown..............	64	.9	24	.6	40	1.9	0	0	0	0
U.S. Total............	7,012	100.0	3,768	100.0	2,152	100.0	692	100.0	400	100.0

1/ Includes only those children for whom age was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-1.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

There are some variations in the age structure across programs. It appears that tribes may be somewhat more likely to receive and/or accept jurisdiction of younger children, who tend to be easier to place and care for than teenagers. Tribal programs serve a higher percentage of children under age 9 than do public programs or the BIA (54 percent compared to 47 percent). Off-reservation programs have the largest percentage of children under age 9 (67 percent) but the small number of children in off-reservation care makes this percentage vulnerable to considerable fluctuation by small changes in the number of children. Off-reservation programs were least likely to have children over age 16, while the BIA had the largest percentage of children over age 18.

Table 3-5A (see Appendix B) contains state-by-state data on the age distribution of Indian children in substitute care. The table groups children in all types of programs--public, tribal, BIA and off-reservation. Of particular interest are some of the variations in age distribution in the states with the largest Indian substitute care populations. Both Alaska and Arizona have more than twice the average percentage of Native American children in the birth-to-one-year age group, with Alaska having 10 percent and Arizona 11 percent compared to the national average of 5 percent. Oklahoma has almost 6 percent more children than the national average in the 1-3 year old category.

Arizona has a much lower percentage of children 10-12 years (7 percent) than average (14 percent), but more children aged 13-15 years (23 percent compared to an average of 18 percent). Other Indian populous states with high percentages in the 13-15 age category include Minnesota (22 percent) and Wisconsin (21 percent). In the older age group, South Dakota had 27 percent of its substitute care children in the 16-17 age group compared to a national average of 14 percent.

Reason for Placement

Over three-fourths (78 percent) of the Indian children in care were placed because of parental behavior or problems, including abuse and neglect (Table 3-6). The largest percentage of children are placed because of neglect (37 percent). Nationally, only 13 percent of the children are in care because of abuse. (This figure could be as high as 15 percent, depending on the actual allocation of abuse and neglect cases in states where the State agency reported abuse and neglect as one category.[1]) Substance abuse is the third largest category of parental problems, being the reason for 14 percent of the placements. Based on case record reviews in four states, it is quite likely that many of the neglect cases also are due to substance abuse (primarily alcohol).

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[1] Public programs in five states classify abuse and neglect together as a single reason for placement. These states reported a total of 228 children placed because of "abuse/neglect." In Table 3-6, the abuse/neglect data for

(footnote continued bottom next page)

Table 3-6

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND TYPE OF PROGRAM, 1986 1,2/

Reason for Placement	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Abuse, Molestation.......	962	13.2	548	17.6	287	9.6	76	10.1	51	12.5
Neglect.................	2,714	37.3	1,198	38.6	1,102	36.7	248	32.9	166	40.6
Abandonment.............	640	8.8	309	9.9	256	8.5	21	2.8	54	13.2
Parent Substance Abuse...	1,041	14.3	79	2.5	670	22.3	236	31.3	56	13.7
Hardship, No Housing.....	71	1.0	12	.4	41	1.4	14	1.9	4	1.0
Other Parent Condition...	245	3.4	132	4.2	85	2.8	13	1.7	15	3.7
Child Status Offense.....	367	5.0	75	2.4	190	6.3	69	9.2	33	8.1
Child Substance Abuse....	146	2.0	25	.8	106	3.5	10	1.3	5	1.2
Other Delinquency........	286	3.9	134	4.3	101	3.4	41	5.4	10	2.4
Child Disability.........	195	2.7	105	3.4	59	2.0	22	2.9	9	2.2
Other Reason............	231	3.2	205	6.6	21	.7	2	.3	3	.7
Reason Unknown..........	372	5.1	285	9.2	83	2.8	1	.1	3	.7
U.S. Total...........	7,270	100.0	3,107	100.0	3,001	100.0	753	100.0	409	100.0

1/ Includes only those children for whom reason for placement was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-1.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

Thus, protective service reasons (neglect, abuse) account for 50 percent of the cases, and parental problem reasons (abandonment, hardship, substance abuse, other) for 28 percent. This is slightly fewer neglect/abuse placements than for foster children of all ethnic groups (56 percent) and somewhat more for parental reasons (18 percent for all groups including parent condition, absence, and relinquishment) (VCIS, 1984). Thus Indians appear somewhat less likely to abuse or neglect their children but more likely to have personal problems that cause placement. The two categories combined (abuse/neglect and parental reasons) account for a somewhat similar percentage of cases for Native American children as for the overall substitute care population (78 percent Indian and 73 percent overall).

Somewhat surprisingly, given the high poverty level among Indians, only 1 percent of the children were placed because of "hardship." However, poverty is often a contributor to cases defined as neglect.

Only 14 percent of the children were placed for child reasons. Of these, status offenses were most common, followed by "other delinquency." Three percent were placed because of a disability. Again, these figures are quite similar to substitute care placement reasons for all children.

Public programs were somewhat more likely than tribes or BIA agencies to have children placed because of abuse (16 percent versus 10 percent). However, public and off-reservation programs were about equally likely to have children placed because of abuse (16 and 13 percent, respectively). Off-reservation programs had a somewhat greater proportion of children placed because of neglect than did the other programs (41 percent versus 35 percent for public, 37 percent for tribes and 33 percent for BIA).

One of the most dramatic differences among program types was found in placements for parental substance abuse. Tribes, BIA agencies, and off-reservation programs had large proportions of placements for this reason (22 percent, 31 percent, and 14 percent, respectively) compared to only 1 percent for public programs. This may be because public programs operating under State laws and legal precedents usually do not consider (or would not classify) substance abuse alone as a reason for placement. Generally neglect would have to be demonstrated for a placement to occur, even if alcohol were a contributing factor.

However, when the categories of abuse, neglect, and substance abuse are combined for each type of program, tribal, BIA and off-reservation programs have much higher percentages of their placements in these categories than do

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[1] (continued) each of these has been allocated to the "abuse" and "neglect" categories in proportion to the numbers reported by all other public programs. If in fact all 228 cases were abuse and none were neglect, the percentage of children placed for abuse would rise to 15 percent for the "Total" and 21 percent for "Public Programs." If, instead, all 228 cases were neglect and none were abuse, the percentage of neglect cases would rise to 37 percent in both the "Total" and the "Public Programs" columns.

public programs (69, 74, and 67 percent for tribes, BIA and off-reservation, respectively, versus 59 percent for public programs). Thus it does not appear that States are simply counting substance abuse in other categories.

Table 3-6A (see Appendix B) displays state-by-state data on the reason for placement. Compared to the national averages, three states with large Indian substitute care populations, Alaska, Arizona, and California, had much higher levels of placement because of abuse--24 percent, 18 percent, and 21 percent respectively--compared to the national average of 13 percent. In contrast, Oklahoma and South Dakota had low rates of abuse placements--7 and 8 percent, respectively.

The national figure for children placed because of neglect was 37 percent. In contrast, several states showed higher proportions of children placed for this reason: Alaska had 51 percent, Montana had 45 percent, and Oklahoma had 52 percent.

As Table 3-6A shows, parental substance abuse as a reason for placement nationally is 14 percent. However, in South Dakota it is 34 percent, in New Mexico 40 percent, and in New York 24 percent. It is 18 percent in Montana, North Dakota, and Oklahoma.

The category of "other (child) delinquency" contains some surprising findings. The national percentage is 4; however, it is 23 percent in Utah, 12 percent in Idaho, 8 percent in New York, and 8 percent in Minnesota.

Length of Time in Care

As Table 3-7 shows, 38 percent of the children had been in substitute care for 2 years or more, the same percentage as that of children of all ethnic groups. The median length of time in care for Indian children was 12-23 months; 56 percent of the children had been in care less than 2 years.

Nearly a quarter of the Indian children had been in care less than six months. Sixteen percent had been in care from 6-11 months and 16 percent in care 1-2 years. Almost 12 percent had been in care 2-3 years and 11 percent in care 3-5 years. A slightly larger proportion (16 percent) had been in care over 5 years.

Tribes had children in care the shortest period of time, with 66 percent of the children in care 2 years or less compared to 57 percent for the public programs, 52 percent for the off-reservation programs, and 24 percent for the BIA. While it is likely that some of these children had been in public care for some period prior to being transferred to tribal care, it appears that tribes are moving children out of care more quickly than other programs.

The BIA had a high percentage--38 percent--of its children in care for over 5 years, more than twice the percentage for public programs or tribes. The finding that the BIA tends to have somewhat older children in its care than the other programs appears to indicate that many of these children have "grown up" in substitute care.

Table 3-7

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND TYPE OF PROGRAM, 1986 1,2/

Length of Time in Care	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Less than 6 Months.......	1,504	23.6	794	25.0	542	25.9	73	10.5	95	23.0
6 - 11 Months...........	1,027	16.1	491	15.5	438	21.0	52	7.5	46	11.1
12 - 23 Months...........	1,045	16.4	537	16.9	394	18.9	41	5.9	73	17.7
24 - 35 Months...........	738	11.6	346	10.9	205	9.8	129	18.6	58	14.0
36 - 59 Months...........	686	10.8	315	9.9	182	8.7	135	19.5	54	13.1
60 Months or Longer......	995	15.6	459	14.5	187	9.0	262	37.9	87	21.1
Length of Time Unknown...	372	5.8	231	7.3	141	6.7	0	0	0	0
U.S. Total............	6,367	100.0	3,173	100.0	2,089	100.0	692	100.0	413	100.0

1/ Includes only those children for whom length of time in care was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-1.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

Table 3-7A (Appendix B) presents the length of time in care by state. The average percentage of Native American children in care less than a year is 40 percent nationally. However, several states have much higher percentages in care for less than a year, including Idaho (86 percent), Nebraska (84 percent), Alaska (61 percent), Utah (54 percent), South Dakota (50 percent), Minnesota (50 percent), and Arizona (50 percent). These states appear to be moving children out of care more quickly. Several states are notable for having high percentages of children in care for a long time. Those with large percentages of children in care for more than 2 years include Montana (84 percent), Illinois (66 percent), Mississippi (59 percent), and North Carolina and Washington (52 percent each). The national average is 38 percent.

Living Arrangements

Over three-fourths of the Indian children in care are residing in family settings--either foster homes or unfinalized adoptive homes (Table 3-8). Another 7 percent reside in group homes. However, 10 percent live in child care institutions, residential treatment facilities or secure facilities.

It is somewhat difficult to compare these figures to VCIS because VCIS includes children in their own homes under post-placement supervision. However, it appears that the percentage of Indian foster children in family settings is similar to that for all foster children.

There is considerable variation in the living arrangements across program types. Off-reservation programs are most likely to place children with foster families, at a rate of 94 percent. Public programs have 79 percent of their children in these family settings compared to 77 percent in tribal programs and only 59 percent in BIA agencies. The largest percentage of children in institutions or secure facilities is found in tribal programs with 11 percent, compared to 6 percent in the BIA, 4 percent in public agencies, and less than 1 percent in off-reservation programs. The large percentage (28 percent) of BIA children in "other settings" are children in one BIA agency.

Table 3-8A (Appendix B) presents the percentage of Indian children in the various living arrangements by state. The generally preferred form of care, foster homes, is the substitute care setting for 73 percent of Indian children nationally. Generally, the states with large Indian populations have a higher percentage of children in foster homes: Alaska (74 percent), California (88 percent), Oklahoma (92-percent), North Dakota (85 percent), South Dakota (84 percent), Washington (84 percent), and Wisconsin (77 percent). However, Arizona (38 percent), Minnesota (62 percent), and Montana (48 percent) have less than the average percentage of children in foster homes. Arizona has 31 percent in institutions compared to the national average of 6 percent.

Table 3-8

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND TYPE OF PROGRAM, 1986 1,2/

Substitute Care Setting	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Foster Home..............	5,834	73.2	3,312	76.7	1,828	68.9	397	58.1	297	92.5
Non-final Adoptive Home..	297	3.7	83	1.9	204	7.7	4	.6	6	1.9
Group Home..............	542	6.8	371	8.6	147	5.5	19	2.8	5	1.6
Child Care Institution, Secure Facility........	512	6.4	164	3.8	303	11.4	43	6.3	2	.6
Residential Treatment....	284	3.6	162	3.8	97	3.7	18	2.6	7	2.2
Independent Living.......	42	.5	15	.3	16	.6	9	1.3	2	.6
Other Setting............	334	4.2	86	2.0	53	2.0	193	28.3	2	.6
Setting Unknown..........	129	1.6	123	2.8	6	.2	0	0	0	0
U.S. Total...........	7,974	100.0	4,316	100.0	2,654	100.0	683	100.0	321	100.0

1/ Includes only those children for whom substitute care setting was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-1.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

Race of Foster Parents

One of the greatest concerns leading to the passage of the Indian Child Welfare Act was the placement of Indian children in non-Indian foster and adoptive homes.

Data were obtained on the race/ethnicity of the foster parents of those children in foster homes (Table 3-9). Although these data were available for only 4,400 of the foster children, the findings are dramatic. Sixty-three percent of Indian foster children were placed in foster homes in which at least one parent was American Indian or Alaska Native. However most of those children were in tribal, BIA or off-reservation programs; only 35 percent of Indian children in public care were in Indian foster homes. Twenty-seven percent of public agency children were in white homes, 12 percent in other race homes, and less than one percent each in Hispanic and black homes. The foster parents' race was unknown in 25 percent of the cases of public programs that reported on this topic. Note, however, that only 1,900 of 3,300 children in public care foster homes are represented in Table 3-9.

As would be expected, tribal programs were most successful at placing children in Indian homes, with 85 percent of their children in these homes. Tribes placed 11 percent with white families, 2 percent with Hispanics, and 1 percent with blacks. Less than 1 percent each were with other races or unknown.

The BIA also had a high percentage of Indian placements at 83 percent, and 14 percent in white homes. The off-reservation programs had fewer Indian placements (75 percent) and 19 percent in white homes.

It appears progress is being made in this area but many Indian children are still in non-Indian homes, especially the children in public care. This can be considered a failure to comply with the ICWA, but also an indication of the shortage of Indian foster families.

Table 3-9A (Appendix B) presents the race of foster parents by state. Viewed against the national average of 63 percent of the children in Indian homes, a number of states are performing well in placing children with Indian families. These include North Dakota (97 percent), Oklahoma (88 percent), Washington (86 percent), California (88 percent), Montana (84 percent), Mississippi (92 percent), and Wisconsin (88 percent). In contrast, several states were placing a minority of the children with Indian families, including Alaska (45 percent), Oregon (37 percent), and New York (34 percent).

Case Goal

Establishment of case goals for children is a central component of the permanency planning effort in child welfare. Case goals are required by Public Law 96-272, with reunification of the family as the goal of choice. If returning home is not possible, placement with relatives, adoption, or guardianship are the preferred goals. Generally, emancipation is considered an appropriate goal only for older children who are nearing the age of

Table 3-9

NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND TYPE OF PROGRAM, 1986 [1,2]

Race/Ethnicity of Foster Parents	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
American Indian/Alaska Native [3]............	2,755	62.6	667	35.2	1,558	84.7	307	83.2	223	74.6
White, not Hispanic......	832	18.9	518	27.4	206	11.2	52	14.1	56	18.7
Black, not Hispanic......	39	.9	14	.7	18	1.0	1	.3	6	2.0
Hispanic.................	48	1.1	4	.2	29	1.6	7	1.9	8	2.7
Asian or Pacific Islander	0	0	0	0	0	0	0	0	0	0
Other Race or Ethnic Category..............	237	5.4	220	11.6	15	.8	2	.5	0	0
Race Unknown or Not Reported..............	489	11.1	470	24.8	13	.7	0	0	6	2.0
U.S. Total...........	4,400	100.0	1,893	100.0	1,839	100.0	369	100.0	299	100.0

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[1] Includes only those children in foster homes for whom race/ethnicity of foster parents was reported. Some programs did not provide data on this topic, so the U.S. total for this tables does not equal the total number in foster homes in Table 3-8.

[2] For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

[3] Child is counted in this category if either foster parent is Native American.

majority (usually age 18). Long-term foster care usually is not considered an appropriate permanency goal.

Forty-four percent of the Indian children in care had return home as their goal (Table 3-10). Another 11 percent had placement with relatives, 9 percent had adoption, and 1 percent had guardianship as their goal. Thus, 65 percent had a goal that would place them in a permanent family setting. Long-term foster care was the goal for 16 percent of the children. No goal was indicated for 7 percent. "Other goals" accounted for 6 percent and only 4 percent of the children had emancipation as their goal.

These percentages do not vary greatly from the distribution of goals among children in substitute care from all ethnic groups except for return home/relative placement and emancipation. Of the Indian children, 56 percent had a goal of return home, placement with relatives or guardianship, compared to 51 percent of all foster children. Fewer Indian children had a goal of adoption compared to all children (9 versus 14 percent). Long-term foster care was the goal for 16 percent of the Indians and 17 percent of all children. No goal was indicated for the 7 percent of the Indians and 7 percent of all children. However, emancipation was the goal for 9 percent of all children but only 4 percent of the Indians. Thus Indian children are somewhat more likely to have a goal of returning to family/relative placement, and less likely to have a goal of adoption or emancipation than all foster children.

The goals varied considerably across program type. Children in tribal care were the most likely to have return home as a goal (50 percent). In off-reservation programs 48 percent of the children had a goal of return home as did 43 percent of the children in public programs. However, only 26 percent of the children in the BIA agencies had that goal.

Long-term foster care was the goal for 25 percent of the BIA children compared to 19 percent of children in public and off-reservation programs and 11 percent in tribal programs. Off-reservation and public programs were most likely to have adoption as a goal with 13 percent each, followed by tribes with 6 percent, and the BIA with 4 percent. Relative placement was the goal for 15 percent of BIA children and 14 percent of children in tribal care. Only 9 and 8 percent of off-reservation and public program children, respectively, had this goal.

BIA programs had by far the most cases with goals of emancipation, at 13 percent, followed by public programs at 4 percent, and off-reservation and tribal programs, both at 3 percent.

Children were most likely to have no case goal in BIA programs (16 percent) followed by tribal programs (11 percent), and off-reservation and public programs (each, 3 percent).

In summary, children were most likely to receive a goal for placement with a permanent family (return home, relative placement, guardianship, or adoption) if they were in tribal or off-reservation programs, where 70 percent of the children had one of these goals. They were next most likely

Table 3-10

NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND TYPE OF PROGRAM, 1986 1,2/

Case Goal	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Return Home	2,772	44.1	1,243	43.1	1,151	50.1	183	26.4	195	47.8
Placement with Relative	691	11.0	225	7.8	328	14.3	100	14.5	38	9.3
Adoption	580	9.2	363	12.6	138	6.0	25	3.6	54	13.2
Guardianship	72	1.1	72	2.5	0	0	0	0	0	0
Long-term Foster Care	1,032	16.4	537	18.6	246	10.7	173	25.0	76	18.6
Emancipation	277	4.4	111	3.9	62	2.7	92	13.3	12	2.9
Other Goal	399	6.4	257	8.9	112	4.9	11	1.6	19	4.7
No Goal Established	457	7.3	75	2.6	260	11.3	108	15.6	14	3.4
U.S. Total	6,280	100.0	2,883	100.0	2,297	100.0	692	100.0	408	100.0

1/ Includes only those children for whom case goal was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-1.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

to have a permanent family care goal in public programs (66 percent) and least likely in BIA programs (45 percent).

These and earlier findings raise questions about care provided by the BIA. A low percentage of children in BIA care have a goal of returning home (26 percent), while high percentages have goals of long-term care (25 percent), emancipation (13 percent), and no goal (16 percent). (However, as shown later in Table 3-14, more BIA children are discharged to return home than have this as their goal, although this is true for all programs.) Further, a high percentage of children are in BIA care for over 5 years (38 percent) and BIA agencies have the lowest percentage of children in family substitute care settings. It appears that the BIA is taking children into care and keeping them there for long periods of time with infrequent plans to place them in family settings.

Table 3-10A (Appendix B) shows case goals by state for Indian children. The goals of choice--return home, placement with relatives, guardianship and adoption--are the goals for 65 percent of the Indian children nationwide. States with high levels of these goals include California (82 percent) and South Dakota (81 percent). Levels also appear to be high in Arizona (79 percent) and North Dakota (76 percent), although case goal data were not provided for many children in the latter two states, making the validity of these percentages questionable. The same is true of Montana, which is the one state with a large Indian population that appears to have a low level of these goals (35 percent).

C. Flow of Children through Substitute Care

Children enter and leave foster care over the course of a year. The examination of this flow of children provides valuable information on rates of entry and discharge and can predict increasing levels of the substitute care population. Flow data from the survey are presented in this section.

Children Entering Care

During reporting year 1986, 9,324 Indian children entered foster care. The largest percentage (46 percent) entered tribal care, followed by 39 percent in public care, 12 percent in BIA care, and 4 percent in off-reservation care (Table 3-11).

Re-entry of Children into Care

Table 3-12 presents the number of children entering substitute care who had been in care before by state and type of program. Because so few programs could provide these data, it is important to use these numbers for comparison only for those programs that provided both entry and re-entry data. For the programs providing both types, the total number of children entering care was 6,337; of these, 1,188 were re-entrants, a re-entry rate of 19 percent. This rate is nearly identical to the 1984 VCIS re-entry rate of 20 percent for children of all ethnic groups. Both the ICWA data and the

Table 3-11

NATIVE AMERICAN CHILDREN ENTERING SUBSTITUTE CARE DURING REPORTING YEAR BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total	9,324	100.0	3,609	38.7	4,251	45.6	1,114	11.9	350	3.8
Alabama	14	.2	1	7.1	13	92.9	-	-	-	-
Alaska	1,506	16.2	1,343	89.2	163	10.8	-	-	-	-
Arizona 2/	1,130	12.1	61	5.4	1,039	91.9	13	1.2	17	1.5
Arkansas	5	.1	5	100.0	-	-	-	-	-	-
California	397	4.3	212	53.4	150	37.8	-	-	35	8.8
Colorado	91	1.0	79	86.8	12	13.2	-	-	-	-
Connecticut	5	.1	5	100.0	-	-	-	-	-	-
Delaware	1	*	1	100.0	-	-	-	-	-	-
District of Columbia	-	-	-	-	-	-	-	-	-	-
Florida	10	.1	6	60.0	4	40.0	-	-	-	-
Georgia	0	0	0	-	-	-	-	-	-	-
Hawaii	1	*	1	100.0	-	-	-	-	-	-
Idaho	75	.8	6	8.0	59	78.7	10	13.3	-	-
Illinois	141	1.5	17	12.1	-	-	-	-	124	87.9
Indiana	1	*	1	100.0	-	-	-	-	-	-
Iowa	-	-	-	-	-	-	-	-	-	-
Kansas	28	.3	15	53.6	13	46.4	-	-	-	-
Kentucky	0	0	0	-	-	-	-	-	-	-
Louisiana	7	.1	7	100.0	-	-	-	-	-	-
Maine	41	.4	10	24.4	31	75.6	-	-	-	-
Maryland	1	*	1	100.0	-	-	-	-	-	-
Massachusetts	-	-	-	-	-	-	-	-	-	-
Michigan	89	1.0	-	0	37	41.6	-	-	52	58.4
Minnesota	856	9.2	589	68.8	267	31.2	-	-	-	-
Mississippi	183	2.0	0	0	183	100.0	-	-	-	-

Table 3-11

NATIVE AMERICAN CHILDREN ENTERING SUBSTITUTE CARE DURING REPORTING YEAR BY STATE AND TYPE OF PROGRAM, 1986 [1]

(continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	0	0	0	-	-	-	-	-	-	-
Montana	1,026	11.0	448	43.7	80	7.8	480	46.8	18	1.8
Nebraska	86	.9	67	77.9	-	-	19	22.1	-	-
Nevada	144	1.5	19	13.2	125	86.8	-	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	-	-	-	-	-	-	-	-	-	-
New Mexico	172	1.8	-	0	87	50.6	85	49.4	-	-
New York	62	.7	35	56.5	-	-	-	-	27	43.5
North Carolina	23	.2	-	0	23	100.0	-	-	-	-
North Dakota	475	5.1	116	24.4	346	72.8	13	2.7	-	-
Ohio	2	*	2	100.0	-	-	-	-	-	-
Oklahoma	715	7.7	119	16.6	588	82.2	8	1.1	-	-
Oregon	347	3.7	177	51.0	170	49.0	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	0	0	0	-	-	-	-	-	-	-
South Carolina	-	-	-	-	-	-	-	-	-	-
South Dakota	873	9.4	-	0	475	54.4	398	45.6	-	-
Tennessee	-	-	-	-	-	-	-	-	-	-
Texas	9	.1	9	100.0	-	-	-	-	-	-
Utah	84	.9	37	44.0	47	56.0	-	-	-	-
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia	0	0	0	-	-	-	-	-	-	-
Washington	167	1.8	-	0	150	89.8	-	-	17	10.2
West Virginia	-	-	-	-	-	-	-	-	-	-
Wisconsin	469	5.0	220	46.9	189	40.3	-	-	60	12.8
Wyoming	88	.9	-	0	-	-	88	100.0	-	-

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[1] For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

[2] Data for all children entering care under jurisdiction of the Navajo Tribal Court are reported in the Arizona line. A large but unknown percentage of these children were in other states when they were taken into care.

* Less than 0.05 percent.

Table 3-12

NATIVE AMERICAN CHILDREN ENTERING SUBSTITUTE CARE WHO HAD BEEN IN CARE PREVIOUSLY BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total	1,188	100.0	282	23.7	731	61.5	105	8.8	70	5.9
Alabama	0	0	0	-	0	-	-	-	-	-
Alaska	16	1.3	-	0	16	100.0	-	-	-	-
Arizona	70	5.9	-	0	62	88.6	2	2.9	6	8.6
Arkansas	-	-	-	-	-	-	-	-	-	-
California	27	2.3	-	0	20	74.1	-	-	7	25.9
Colorado	32	2.7	25	78.1	7	21.9	-	-	-	-
Connecticut	3	.3	3	100.0	-	-	-	-	-	-
Delaware	0	0	0	-	-	-	-	-	-	-
District of Columbia	-	-	-	-	-	-	-	-	-	-
Florida	6	.5	6	100.0	0	0	-	-	-	-
Georgia	0	0	0	-	-	-	-	-	-	-
Hawaii	0	0	0	-	-	-	-	-	-	-
Idaho	5	.4	0	0	5	100.0	0	0	-	-
Illinois	21	1.8	17	81.0	-	-	-	-	4	19.0
Indiana	0	0	0	-	-	-	-	-	-	-
Iowa	-	-	-	-	-	-	-	-	-	-
Kansas	-	-	-	-	0	-	-	-	-	-
Kentucky	0	0	0	-	-	-	-	-	-	-
Louisiana	0	0	0	-	-	-	-	-	-	-
Maine	15	1.3	5	33.3	10	66.7	-	-	-	-
Maryland	0	0	0	-	-	-	-	-	-	-
Massachusetts	-	-	-	-	-	-	-	-	-	-
Michigan	13	1.1	-	0	5	38.5	-	-	8	61.5
Minnesota	249	21.0	150	60.2	99	39.8	-	-	-	-
Mississippi	121	10.2	0	0	121	100.0	-	-	-	-

Table 3-12

NATIVE AMERICAN CHILDREN ENTERING CARE WHO HAD BEEN IN CARE PREVIOUSLY BY STATE AND TYPE OF PROGRAM, 1986 1/

(continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	0	0	0	-	-	-	-	-	-	-
Montana	58	4.9	-	-	11	19.0	29	50.0	18	31.0
Nebraska	8	.7	7	87.5	-	-	1	12.5	-	-
Nevada	36	3.0	-	0	36	100.0	-	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	-	-	-	-	-	-	-	-	-	-
New Mexico	22	1.9	-	0	12	54.5	10	45.5	-	-
New York	10	.8	3	30.0	-	-	-	-	7	70.0
North Carolina	5	.4	-	0	5	100.0	-	-	-	-
North Dakota	117	9.8	13	11.1	95	81.2	9	7.7	-	-
Ohio	0	0	0	-	-	-	-	-	-	-
Oklahoma	18	1.5	-	0	18	100.0	0	0	-	-
Oregon	59	5.0	38	64.4	21	35.6	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	0	0	0	-	-	-	-	-	-	-
South Carolina	-	-	-	-	-	-	-	-	-	-
South Dakota	118	9.9	-	0	94	79.7	24	20.3	-	-
Tennessee	-	-	-	-	-	-	-	-	-	-
Texas	-	-	-	-	-	-	-	-	-	-
Utah	26	2.2	15	57.7	11	42.3	-	-	-	-
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia	-	-	-	-	-	-	-	-	-	-
Washington	56	4.7	-	0	56	100.0	-	-	0	0
West Virginia	-	-	-	-	-	-	-	-	-	-
Wisconsin	47	4.0	-	0	27	57.4	-	-	20	42.6
Wyoming	30	2.5	-	0	-	-	30	100.0	-	-

1/ For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

VCIS data have been reported by only some of the 50 states so they cannot be interpreted as nationally representative.

Twenty-four public programs reported both entry and re-entry data. In these programs, 1,158 Indian children entered care, of which 282 were re-entering, yielding a recidivism rate of 24 percent. Eighty-one tribal programs reported 4,068 entrants including 731 re-entrants, an 18 percent rate. Fifty BIA programs reported 761 entrants and 105 re-entrants for a 14 percent rate, and 9 off-reservation programs reported 350 children entering and 70 re-entering for a 20 percent rate. For the programs reporting, BIA agencies are doing the best at keeping children from re-entering the system, followed by tribes, off-reservation programs and last, public programs.

Table 3-13 presents both entry (Table 3-11) and re-entry (Table 3-12) data for the public programs that reported data on both topics. Repeat cases are generally high. Both Florida and Illinois reported that all children entering during the year had been in care previously, for a rate of 100 percent. Maine had 50 percent, followed by Utah with 41 percent, Colorado (32 percent), Minnesota (26 percent), and Oregon (22 percent).

Discharge of Children from Care

The number of Indian children leaving substitute care totalled 6,258 for reporting year 1986 (Table 3-14). This is 3,066 fewer children than the number entering. At this rate, the number of Indian children in substitute care will rise dramatically over the coming years.

The total number of Indian children served during the year (the number of children leaving care plus the number in care at the end of the year) was approximately 15,263 for those agencies that reported both numbers. The actual number is probably lower, as some of these children left and re-entered care during the year.

The majority of discharges in each state came from the public programs except in Arizona, Idaho, Maine, Mississippi, Montana, New York, New Mexico, North Dakota, Washington, and Wyoming, where tribes, the BIA or off-reservation programs had the majority of discharges.

Net Change in Number of Children in Care

Table 3-15 shows the net change in the number of Native American children in care by type of program. While not all programs were able to provide both intake and discharge data, most of the children who entered and left care are represented by the programs that reported both types of data. Overall, programs had a net gain of 3,108 children, meaning more children entered care than left. Most of these children are found in tribal programs, which show a net gain of 2,620 children. BIA and off-reservation programs also experienced a net gain of 501 and 166 children, respectively. Conversely, public agencies discharged more children than entered care, because their net change was a loss of 179 children. These findings are evidence of the increased demand faced by the Indian-affiliated programs to provide children welfare services for growing numbers of families.

Table 3-13

PERCENTAGE OF NATIVE AMERICAN CHILDREN ENTERING PUBLIC SUBSTITUTE CARE WHO HAD BEEN IN CARE PREVIOUSLY BY STATE, 1986 1/

State 2/	Children Entering Public Care		
	Total Entering	In Care Previously	
		Number	Percent of Those Entering
Colorado	79	25	31.6
Connecticut	5	3	60.0
Delaware	1	0	-
Florida	6	6	100.0
Hawaii	1	0	-
Idaho	6	0	-
Illinois	17	17	100.0
Indiana	1	0	-
Louisiana	7	0	-
Maine	10	5	50.0
Maryland	1	0	-
Minnesota	589	150	25.5
Nebraska	67	7	10.4
New York	35	3	8.6
North Dakota	116	13	11.2
Ohio	2	0	-
Oregon	177	38	21.5
Utah	37	15	40.5
Total	1,157	282	24.4

1/ For 70 percent of reporting programs, reporting year is 7/1/87 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

2/ Only states having Native American children in public care and reporting data on children reentering care are shown.

Table 3-14

NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE SUBSTITUTE CARE DURING REPORTING YEAR BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total	6,258	100.0	3,830	61.2	1,631	26.1	613	9.8	184	2.9
Alabama	2	*	2	100.0	0	0	-	-	-	-
Alaska	1,279	20.4	1,245	97.3	34	2.7	-	-	-	-
Arizona	194	3.1	-	0	173	89.2	9	4.6	12	6.2
Arkansas	-	-	-	-	-	-	-	-	-	-
California	223	3.6	147	65.9	58	26.0	-	-	18	8.1
Colorado	103	1.6	92	89.3	11	10.7	-	-	-	-
Connecticut	0	0	0	-	-	-	-	-	-	-
Delaware	1	*	1	100.0	-	-	-	-	-	-
District of Columbia	-	-	-	-	-	-	-	-	-	-
Florida	7	.1	7	100.0	0	0	-	-	-	-
Georgia	2	*	2	100.0	-	-	-	-	-	-
Hawaii	2	*	2	100.0	-	-	-	-	-	-
Idaho	69	1.1	6	8.7	54	78.3	9	13.0	-	-
Illinois	80	1.3	19	23.7	-	-	-	-	61	76.2
Indiana	1	*	1	100.0	-	-	-	-	-	-
Iowa	-	-	-	-	-	-	-	-	-	-
Kansas	33	.5	29	87.9	4	12.1	-	-	-	-
Kentucky	-	-	-	-	-	-	-	-	-	-
Louisiana	2	*	2	100.0	-	-	-	-	-	-
Maine	25	.4	3	12.0	22	88.0	-	-	-	-
Maryland	-	-	-	-	-	-	-	-	-	-
Massachusetts	-	-	-	-	-	-	-	-	-	-
Michigan	45	.7	-	0	19	42.2	-	-	26	57.8
Minnesota	799	12.8	621	77.7	178	22.3	-	-	-	-
Mississippi	79	1.3	0	0	79	100.0	-	-	-	-

Table 3-14

NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE DURING REPORTING YEAR BY STATE AND TYPE OF PROGRAM, 1986 1/
(continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	0	0	0	-	-	-	-	-	-	-
Montana	255	4.1	-	0	70	27.5	177	69.4	8	3.1
Nebraska	111	1.8	92	82.9	-	-	19	17.1	-	-
Nevada	58	.9	-	0	58	100.0	-	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	-	-	-	-	-	-	-	-	-	-
New Mexico	86	1.4	-	0	46	53.5	40	46.5	-	-
New York	47	.8	20	42.6	-	-	-	-	27	57.4
North Carolina	115	1.8	92	80.0	23	20.0	-	-	-	-
North Dakota	310	5.0	124	40.0	162	52.3	24	7.7	-	-
Ohio	3	*	3	100.0	-	-	-	-	-	-
Oklahoma	461	7.4	328	71.1	128	27.8	5	1.1	-	-
Oregon	266	4.3	167	62.8	99	37.2	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	0	0	0	-	-	-	-	-	-	-
South Carolina	-	-	-	-	-	-	-	-	-	-
South Dakota	1,052	16.8	484	46.0	282	26.8	286	27.2	-	-
Tennessee	-	-	-	-	-	-	-	-	-	-
Texas	21	.3	21	100.0	-	-	-	-	-	-
Utah	101	1.6	79	78.2	22	21.8	-	-	-	-
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia	1	*	1	100.0	-	-	-	-	-	-
Washington	93	1.5	-	0	76	81.7	-	-	17	18.3
West Virginia	-	-	-	-	-	-	-	-	-	-
Wisconsin	288	4.6	240	83.3	33	11.5	-	-	15	5.2
Wyoming	44	.7	-	0	0	0	44	100.0	-	-

1/ For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

* Less than 0.05 percent.

Table 3-15

NET CHANGE IN NUMBER OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE DURING REPORTING YEAR BY TYPE OF PROGRAM, 1986

		Type of Program			
	Total	Public	Tribal	BIA	Off-reservation
Programs Providing both Intake and Discharge Data					
Number of Programs	138	29	84	16	9
Total Children Entering Care	8,790	3,075	4,251	1,114	350
Total Children Discharged	5,682	3,254	1,631	613	184
Net Change	+3,108	-179	+2,620	+501	+166
Programs Providing Intake Data Only					
Number of Programs	6	6	0	0	0
Total Children Entering Care	534	534	0	0	0
Programs Providing Discharge Data Only					
Number of Programs	2	2	0	0	0
Total Children Discharged	576	576	0	0	0
Programs Providing Neither Intake Nor Discharge Data					
Number of Programs	27	14	11	2	0

Flow of Children through Public Programs

Table 3-16 shows the flow of children through care for the public agencies only. Although there are many missing data, public agencies were fairly successful at discharging more children than entered care per year. Public agencies in 15 states discharged more children than entered care while 8 admitted more than were discharged. Nine states showed no difference or no children in care. The public agency in Alaska had the greatest difference with 98 more children entering than leaving, while Oklahoma performed the best with 209 more children leaving than entering care. (Note that only 29 public agencies provided sufficient data to make these comparisons.)

Case Outcomes

Children who left care during the reporting year were more likely to be discharged to family settings (Table 3-17) than children still in care on the reporting date were likely to have family-based permanency goals (Table 3-10). Overall, 79 percent of the children were discharged to family settings while only 65 percent of the children in care had goals of placemen in family settings. This finding is consistent with the premise that the children leaving care are likely to include those who are easier to place than all children in the substitute care population at one time point. However, it also may replicate the finding of earlier child welfare studies that discharge into a family often is possible even when it did not appear so when the goal was assigned (Emlen et. al, 1976). A comparison with VCIS data reveals that 72 percent of foster children of all ethnic groups were reunited, placed with relatives or adopted. As Table 3-17 shows, 86 percent of the children who left off-reservation care returned home, were placed with relatives or guardians, or were adopted, as were 83 percent of the children who left tribal care. Of children in public and BIA care, 78 percent and 72 percent, respectively, were discharged to families.

Children were most likely to leave care through emancipation if they were in BIA care, where 14 percent were emancipated compared to 6 percent in tribal and off-reservation programs and 3 percent in public care. Children returned to their own homes most frequently in public and BIA care (both 64 percent) compared to tribal and off-reservation care (55 percent for both).

Over a quarter of the children in off-reservation care were placed with relatives, as were 19 percent of the children in tribal care. Relative placement was less likely in public (8 percent) or BIA care (7 percent). This finding probably reflects the greater ease with which tribes and off-reservation programs are able to locate and use relatives as placements, as well as their greater emphasis on the extended family as a resource.

Nearly 7 percent of the children in tribal care left by being transferred, twice as many as any other program. This may reflect children transferred to public care because their special needs could not be met with tribal resources. It also includes children transferred to other tribal programs, such as corrections. In contrast, only 1 percent of children in public care were transferred. This number (only 38 children) seems extremel low considering that public agencies are supposed to notify tribes of cases

Table 3-16

FLOW OF NATIVE AMERICAN CHILDREN THROUGH PUBLIC SUBSTITUTE CARE BY STATE, 1986 1/

State	Number Entered Care During Year	Number Served During Year 2/	Number Discharged During Year	Number in Care on Last Day
Alabama	1	6	2	4
Alaska	1,343	2,039	1,245	794
Arizona	61	-	-	40
Arkansas	5	-	-	5
California	212	602	147	455
Colorado	79	171	92	79
Connecticut	5	16	0	16
Delaware	1	2	1	1
District of Columbia	-	-	-	0
Florida	6	20	7	13
Georgia	0	8	2	6
Hawaii	1	2	2	0
Idaho	6	22	6	16
Illinois	17	73	19	54
Indiana	1	4	1	3
Iowa	-	-	-	58
Kansas	15	66	29	37
Kentucky	0	-	-	0
Louisiana	7	5	2	3
Maine	10	38	3	35
Maryland	1	-	-	10
Massachusetts	-	-	-	0
Michigan	-	-	-	85
Minnesota	589	1,006	621	385
Mississippi	0	7	0	7

Table 3-16

FLOW OF NATIVE AMERICAN CHILDREN THROUGH PUBLIC SUBSTITUTE CARE BY STATE, 1986 1/
(continued)

State	Number Enter Care During Year	Number Served During Year 2/	Number Discharged During Year	Number in Care on Last Day
Missouri	0	6	0	6
Montana	448	-	-	243
Nebraska	67	211	92	119
Nevada	19	-	-	14
New Hampshire	-	-	-	-
New Jersey	-	-	-	21
New Mexico	-	-	-	123
New York	35	67	20	47
North Carolina	-	240	92	148
North Dakota	116	296	124	172
Ohio	2	11	3	8
Oklahoma	119	745	328	417
Oregon	177	304	167	137
Pennsylvania	-	-	-	-
Rhode Island	0	4	0	4
South Carolina	-	-	-	15
South Dakota	-	824	484	340
Tennessee	-	-	-	0
Texas	9	41	21	20
Utah	37	160	79	81
Vermont	-	-	-	4
Virginia	0	4	1	3
Washington	-	-	-	346
West Virginia	-	-	-	0
Wisconsin	220	468	240	228
Wyoming	-	-	-	41

1/ For 92 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 1/1/85 - 12/31/85 to 6/6/86 - 6/5/87.

2/ Sum of number discharged during year plus number remaining in care on last day.

Table 3-17

NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE DURING REPORTING YEAR BY CASE OUTCOME AND TYPE OF PROGRAM, 1986 1,2/

Case Outcome	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of Those in Public Care	Number	Percent of Those in Tribal Care	Number	Percent of Those in BIA Care	Number	Percent of Those in Off-reservation Care
Returned Home	3,727	61.1	2,232	64.2	956	55.1	391	63.8	148	54.8
Placed with Relative	714	11.7	279	8.0	321	18.5	45	7.3	69	25.6
Adopted	369	6.1	185	5.3	163	9.4	6	1.0	15	5.6
Guardianship Established	28	.5	28	.8	0	0	0	0	0	0
Emancipated	314	5.2	110	3.2	103	5.9	84	13.7	17	6.3
Ran Away	125	2.1	85	2.4	32	1.8	2	.3	6	2.2
Transferred	180	3.0	38	1.1	114	6.6	19	3.1	9	3.3
Died	20	.3	6	.2	7	.4	6	1.0	1	.4
Other Outcome	286	4.7	272	7.8	12	.7	2	.3	0	0
Outcome Unknown	333	5.5	244	7.0	26	1.5	58	9.5	5	1.9
U.S. Total	6,096	100.0	3,479	100.0	1,734	100.0	613	100.0	270	100.0

1/ Includes only those children for whom case outcome was reported. Some programs did not provide data on this topic, so the U.S. total for this table does not equal the U.S. total in Table 3-14.

2/ For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

and transfer jurisdiction to them if the tribe requests it. Even if most transfers occur so soon after intake that the child was not yet entered in the public agency's database, the number recorded seems quite small given that it also would include cases transferred to mental health or correctiona institutions.

Table 3-17A (Appendix B) shows the outcomes by state for children discharged from care. States with high percentages of children who returned home include: Alaska (77 percent), Mississippi (71 percent), and South Dakota (76 percent). States with low percentages include: Colorado (9 percent), Montana (38 percent), Oregon (48 percent), Oklahoma (50 percent), Utah (21 percent), Wisconsin (41 percent), and Nebraska (45 percent). States with large percentages of children leaving care through emancipation included: Montana (23 percent), Nevada (14 percent), Mississippi (13 percent), and Kansas and Maine (12 percent each).

Adoption-related Data

A total of 340 Indian children were available for adoption from the reporting agencies, indicating that parental rights had been terminated in these cases but the children had not yet been placed with adoptive families (Table 3-18). This is 4 percent of the total Indian substitute care caseload. In contrast, about 8 percent of the substitute care caseload for children of all ethnic groups in 1984 were available for adoption.

This lower rate of Indian children available for adoption may indicate that it is easier to obtain adoptive homes for Indian children compared to children of other racial or ethnic groups. That is, when parental rights are terminated, Indian children are adopted quickly and a lower percentage remain in substitute care than children of other ethnic groups. However, it also may reflect a reluctance to terminate parental rights.

During 1986, 369 Indian children were discharged to adoptive settings (Table 3-17). During that same year, 136 adoptions that were finalized received adoption subsidies (Table 3-19). The latter figure represents 37 percent of the former. Note, however, that some of the children whose subsidized adoptions were finalized during program year 1986 may not be included in the discharge figure because they were discharged during the previous year. The largest group of children receiving subsidies were in tribal care (67 percent) followed by state care (23 percent), off-reservatio care (7 percent), and BIA care (3 percent). Half of the U.S. total of India adoptions that were subsidized took place in tribal care in Arizona. The next largest group was in New Mexico (10 percent).

Table 3-18

NATIVE AMERICAN CHILDREN AVAILABLE FOR ADOPTION BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
	Number	Percent of U.S. Total	Public		Tribal		BIA		Off-reservation	
			Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total..............	340	100.0	184	54.1	111	32.6	14	4.1	31	9.1
Alabama..................	5	1.5	2	40.0	3	60.0	-	-	-	-
Alaska...................	36	10.6	26	72.2	10	27.8	-	-	-	-
Arizona	20	5.9	1	5.0	17	85.0	1	5.0	1	5.0
Arkansas.................	0	0	0	-	-	-	-	-	-	-
California...............	18	5.3	8	44.4	6	33.3	-	-	4	22.2
Colorado.................	2	.6	2	100.0	0	0	-	-	-	-
Connecticut..............	0	0	0	-	-	-	-	-	-	-
Delaware.................	0	0	0	-	-	-	-	-	-	-
District of Columbia.....	-	-	-	-	-	-	-	-	-	-
Florida..................	0	0	0	-	0	-	-	-	-	-
Georgia..................	1	.3	1	100.0	-	-	-	-	-	-
Hawaii...................	0	0	0	-	-	-	-	-	-	-
Idaho....................	3	.9	3	100.0	-	-	0	0	-	-
Illinois.................	48	14.1	48	100.0	-	-	-	-	0	0
Indiana..................	2	.6	2	100.0	-	-	-	-	-	-
Iowa.....................	-	-	-	-	-	-	-	-	-	-
Kansas...................	5	1.5	3	60.0	2	40.0	-	-	-	-
Kentucky.................	-	-	-	-	-	-	-	-	-	-
Louisiana................	0	0	0	-	-	-	-	-	-	-
Maine....................	3	.9	0	0	3	100.0	-	-	-	-
Maryland.................	0	0	0	-	-	-	-	-	-	-
Massachusetts............	-	-	-	-	-	-	-	-	-	-
Michigan.................	19	5.6	4	21.1	1	5.3	-	-	14	73.7
Minnesota	12	3.5	9	75.0	3	25.0	-	-	-	-
Mississippi..............	0	0	0	-	0	-	-	-	-	-

Table 3-18

NATIVE AMERICAN CHILDREN AVAILABLE FOR ADOPTION BY STATE AND TYPE OF PROGRAM, 1986 1/ (continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	1	0.3	1	100.0	-	-	-	-	-	-
Montana	2	.6	-	-	0	0	2	100.0	0	0
Nebraska	7	2.1	7	100.0	-	-	0	0	-	-
Nevada	8	2.4	-	-	8	100.0	-	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	-	-	-	-	-	-	-	-	-	-
New Mexico	1	.3	-	-	1	100.0	0	0	-	-
New York	8	2.4	2	25.0	-	-	-	-	6	75.0
North Carolina	4	1.2	4	100.0	0	0	-	-	-	-
North Dakota	30	8.8	6	20.0	21	70.0	3	10.0	-	-
Ohio	2	.6	2	100.0	-	-	-	-	-	-
Oklahoma	17	5.0	-	-	15	88.2	2	11.8	-	-
Oregon	-	-	-	-	0	-	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	0	0	0	-	-	-	-	-	-	-
South Carolina	1	.3	1	100.0	-	-	-	-	-	-
South Dakota	56	16.5	41	73.2	9	16.1	6	10.7	-	-
Tennessee	-	-	-	-	-	-	-	-	-	-
Texas	-	-	-	-	-	-	-	-	-	-
Utah	2	.6	2	100.0	0	0	-	-	-	-
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia	0	0	0	-	-	-	-	-	-	-
Washington	8	2.4	-	-	2	25.0	-	-	6	75.0
West Virginia	-	-	-	-	-	-	-	-	-	-
Wisconsin	19	5.6	9	47.4	10	52.6	-	-	0	0
Wyoming	0	0	0	-	-	-	0	-	-	-

1/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

Table 3-19

NATIVE AMERICAN ADOPTIONS FINALIZED DURING REPORTING YEAR THAT ARE RECEIVING SUBSIDY BY STATE AND TYPE OF PROGRAM, 1986 1/

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
U.S. Total	136	100.0	31	22.8	91	66.9	4	2.9	10	7.4
Alabama	0	0	0	-	0	-	-	-	-	-
Alaska	6	4.4	-	-	6	100.0	-	-	-	-
Arizona	68	50.0	-	-	68	100.0	0	0	0	0
Arkansas	-	-	-	-	-	-	-	-	-	-
California	7	5.1	-	-	0	0	-	-	7	100.0
Colorado	1	.7	-	-	1	100.0	-	-	-	-
Connecticut	0	0	0	-	-	-	-	-	-	-
Delaware	0	0	0	-	-	-	-	-	-	-
District of Columbia	-	-	-	-	-	-	-	-	-	-
Florida	0	0	0	-	0	-	-	-	-	-
Georgia	0	0	0	-	-	-	-	-	-	-
Hawaii	0	0	0	-	-	-	-	-	-	-
Idaho	4	2.9	2	50.0	2	50.0	0	0	-	-
Illinois	3	2.2	0	0	-	-	-	-	3	100.0
Indiana	0	0	0	-	-	-	-	-	-	-
Iowa	-	-	-	-	-	-	-	-	-	-
Kansas	0	0	0	-	0	-	-	-	-	-
Kentucky	-	-	-	-	-	-	-	-	-	-
Louisiana	0	0	0	-	-	-	-	-	-	-
Maine	0	0	0	-	0	-	-	-	-	-
Maryland	-	-	-	-	-	-	-	-	-	-
Massachusetts	-	-	-	-	-	-	-	-	-	-
Michigan	-	-	-	-	0	-	-	-	0	-
Minnesota	-	-	-	-	0	-	-	-	-	-
Mississippi	2	1.5	0	0	2	100.0	-	-	-	-

Table 3-19

NATIVE AMERICAN ADOPTIONS FINALIZED DURING REPORTING YEAR THAT ARE RECEIVING SUBSIDY BY STATE AND TYPE OF PROGRAM, 1986 1/
(continued)

State	Total		Type of Program							
			Public		Tribal		BIA		Off-reservation	
	Number	Percent of U.S. Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total	Number	Percent of State Total
Missouri	0	0	0	-	-	-	-	-	-	-
Montana	5	3.7	-	-	1	20.0	4	80.0	0	0
Nebraska	2	1.5	2	100.0	-	-	0	0	-	-
Nevada	-	-	-	-	0	-	0	-	-	-
New Hampshire	-	-	-	-	-	-	-	-	-	-
New Jersey	-	-	-	-	-	-	-	-	-	-
New Mexico	14	10.3	10	71.4	4	28.6	0	0	-	-
New York	2	1.5	2	100.0	-	-	-	-	0	0
North Carolina	-	-	-	-	0	-	-	-	-	-
North Dakota	2	1.5	2	100.0	0	0	0	0	-	-
Ohio	0	0	0	-	-	-	-	-	-	-
Oklahoma	2	1.5	-	-	2	100.0	0	0	-	-
Oregon	-	-	-	-	0	-	-	-	-	-
Pennsylvania	-	-	-	-	-	-	-	-	-	-
Rhode Island	0	0	0	-	0	-	-	-	-	-
South Carolina	-	-	-	-	-	-	-	-	-	-
South Dakota	4	2.9	-	-	4	100.0	0	0	-	-
Tennessee	-	-	-	-	-	-	-	-	-	-
Texas	4	2.9	4	100.0	-	-	-	-	-	-
Utah	2	1.5	1	50.0	1	50.0	-	-	-	-
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia	0	0	0	-	-	-	-	-	-	-
Washington	-	-	-	-	-	-	-	-	0	-
West Virginia	-	-	-	-	-	-	-	-	-	-
Wisconsin	8	5.9	8	100.0	0	0	-	-	0	0
Wyoming	0	0	0	-	-	-	0	-	-	-

1/ For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

PART II

CHILD WELFARE SERVICES FOR NATIVE AMERICAN CHILDREN AND FAMILIES

Chapter 4

Field Study Methodology

To examine child welfare practices affecting Indian children comprehensively, the second part of this project required site visits to State and local public programs, tribes, Bureau of Indian Affairs agencies, and off-reservation Indian programs in four states. Personal interviews and case record reviews were the data collection procedures.

Field Study Sites

The four states selected for the field study were Arizona, Minnesota, Oklahoma and South Dakota. All of the states have large Indian populations. They are geographically dispersed and contain different Indian tribes. Minnesota was selected in part because it is a "280 state," meaning that jurisdiction over Indian lands was assigned to the State in 1953 by Public Law 280. Thus, public child welfare programs provide child welfare services on all Minnesota reservations except for the Red Lake Reservation, which was exempted from P.L. 280.

In Oklahoma, all Indian reservations but one were dissolved in preparation for Oklahoma statehood in 1907. The former reservation lands, most of which remain tribal trust areas, comprise what now is termed the "historic areas of Oklahoma." (Urbanized areas are excluded from this designation.) Sovereign tribal governments continue to operate on the trust lands in these historic areas. The issue of State-versus-tribal jurisdiction has not been resolved in the eastern part of Oklahoma, and public child welfare programs have been more active in providing services on trust lands there than in the western part of the state where tribal jurisdiction has been asserted.

Table 4-1 displays 1980 demographic and socioeconomic data on the four field study states. Data are presented for all persons and families in each state and for Native American persons and families. These data show that the Native American population is much younger and somewhat less formally educated. In each state, the median age for Native Americans is eight to ten years lower than for the state population as a whole, the percentage of the population under age 18 is notably larger for Native Americans than for the total population in three of the four states. The median years of education for Native Americans is somewhat less than for the total in all four states, although the median for Native Americans is above the 12th grade level in two of the four.

Native Americans experience greater unemployment than the population as a whole in the field study states and are less well off economically. In the week prior to 1980 census data collection, the rate of unemployment for Native Americans was from two to four times higher in each state than the

Table 4-1

Selected 1980 Census Data for Total and Native American Populations of Field Study States

	Arizona		Minnesota		Oklahoma		South Dakota	
	All Races	Native Americans	All Races	Native Americans	All Races	Native Americans	All Races	Native Americans
TOTAL POPULATION	2,718,215	152,745 (5.6%)	4,075,970	69,965 (1.7%)	3,025,290	169,459 (5.6%)	690,768	44,968 (6.5%)
DATA FOR PERSONS								
Median Age (years)	29.2	19.9	29.2	19.9	30.1	23.9	28.8	18.3
Percent Age 0-17	29.1	45.6	28.7	22.5	28.3	39.0	29.8	48.8
Median Years of School for Persons Age 25+	12.7	10.6	12.6	12.1	12.5	12.2	12.5	11.7
Persons Age 16+ in Civilian Labor Force: Percent Unemployed	6.2	14.4	5.4	20.5	4.1	8.4	4.9	20.3
Percent of Persons with 1979 Income Below Poverty	13.2	44.0	9.5	29.9	13.4	23.9	16.9	47.5
DATA FOR FAMILIES								
Families with Children Age 0-17	352,394	20,106	560,460	4,978	416,350	22,514	93,818	5,690
% Headed by Married Couple	81.3	72.0	85.8	51.3	83.2	77.1	86.1	55.3
% Female Headed	15.4	23.5	12.1	42.3	14.5	20.0	11.6	38.3
Median Family Income in 1979 for								
Families with Children Age 0-5,								
Couple-headed ($)	18,476	12,360	20,720	13,893	17,858	14,292	16,212	11,303
Female-headed ($)	6,335	5,547	5,970	5,034	5,619	5,103	5,060	4,941
Families with Children Age 0-17,								
Couple-headed ($)	21,706	13,254	23,880	17,455	20,603	16,198	18,429	12,554
Female-headed ($)	9,044	6,830	9,200	6,435	7,973	6,875	7,180	5,544
Families with Children Age 0-17 Below Poverty in 1979:	49,395	9,663	51,371	1,917	57,575	6,091	16,286	3,389
Percent of All Families with Children 0-17	14.0	48.1	9.2	38.5	13.8	27.1	17.4	59.6
Percent of Female-headed Families with Children 0-17	37.2	70.8	32.1	62.9	42.6	61.8	46.9	84.1

Source: 1980 Census data from the American Indian/Alaska Native Data Base developed by CSR, Incorporated for the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.

total population rate. Similarly, Native American individuals were from 1.8 to 3.3 times more likely to have been living in poverty in 1979.

Native American families are less likely to be headed by married couples than are the states' families as a group, and are more stressed economically. Among families in the four states, the percentages headed by women with no spouse present are 1.4 to 3.5 times larger for Native Americans than for the total population. Whether headed by a married couple or a woman, Native American families have lower median incomes than families in general. Native American families also experience substantially higher poverty rates--from 2.0 to 4.2 times greater for families with children, regardless of who heads them. Among Native American families headed by females, percentages in poverty range from 62 to 71 percent.

The design for the field study called for the selection of seven sites in each of the four field study states. These were to include:

- three local public child welfare agencies that have large numbers of Indian children in substitute care and/or are located near an Indian- or BIA-operated program included in the study;
- two reservations or tribal trust areas where the tribe operates its own child welfare program;
- one local Bureau of Indian Affairs (BIA) agency that provides child welfare services for the tribe(s) in its service area; and
- one off-reservation Indian center that has a child and family services program.

Officials from the State child welfare agencies and the BIA Central and Area Offices assisted in the selection of sites. As explained in Chapter 7, some problems were encountered in completing all required data collection tasks at two of the BIA agencies. Therefore, a fifth BIA agency in a fifth state--Montana--was recruited for the study at the last minute. All states and sites visited are listed in Table 4-2.

Table 4-3 displays demographic and socioeconomic data, comparable to those in Table 4-1, for the reservations visited for the field study. Note that the table includes the San Carlos, Blackfeet and Pine Ridge Reservations, where child welfare services are provided by a BIA agency visited for the study, as well as the six reservations where tribal programs provide child welfare services. The Oklahoma tribes included in the field study do not have reservations, but instead have jurisdiction over trust lands within the boundaries of their former reservations. Comparable census data are not available for these historic areas.

Data Collection

Data collection methods for the field study comprised interviews and reviews of substitute care case records. The interviews were designed to

Table 4-2

Field Study States and Sites

Arizona

State Child Welfare Agency:
Arizona Department of Economic Security (DES)

Public Programs:
Arizona DES - Flagstaff District
Arizona DES - Phoenix District
Arizona DES - Tucson District

Tribes:
Gila River Pima-Maricopa Indian Community of the Gila River Indian Reservation
Salt River Pima-Maricopa Indian Community of the Salt River Reservation

Off-Reservation Indian Program:
Phoenix Indian Center, Phoenix

BIA Agency:
San Carlos Agency, San Carlos

Minnesota

State Child Welfare Agency:
Minnesota Department of Human Resources

Public Programs:
Beltrami County Social Services
Carlton County Human Services
Ramsey County Community Human Services

Tribes:
Fond du Lac Band of the Minnesota Chippewa Tribe
Red Lake Band of Chippewa Indians

Off-Reservation Indian Program:
St. Paul American Indian Center, St. Paul

BIA Agency:
Red Lake Agency, Red Lake

Oklahoma

State Child Welfare Agency:
Oklahoma Department of Human Services (DHS)

Public Programs:
Oklahoma DHS - Caddo County
Oklahoma DHS - Comanche County
Oklahoma DHS - Osage County

Tribes:
Cheyenne & Arapaho Tribes
Comanche Indian Tribe

Off-Reservation Indian Program:
Indian Health Center, Tulsa

BIA Agency:
Anadarko Agency, Anadarko

South Dakota

State Child Welfare Agency:
South Dakota Department of Social Services (DSS)

Public Programs:
South Dakota DSS - Mission
South Dakota DSS - Pine Ridge
South Dakota DSS - Sioux Falls

Tribes:
Rosebud Sioux Tribe
Sisseton-Wahpeton Sioux Tribe

Off-Reservation Indian Program:
American Indian Services, Inc., Sioux Falls

BIA Agency:
Pine Ridge Agency, Pine Ridge

Montana

BIA Agency:
Blackfeet Agency, Browning

Table 4-3

Selected 1980 Census Data for Reservations Visited for Field Study

	Arizona			Minnesota		Montana	South Dakota		
	Gila River	Salt River	San Carlos[1]	Fond du Lac	Red Lake	Blackfeet[1]	Pine Ridge	Rosebud	Sisseton-Wahpeton[1]
TOTAL POPULATION	7,345	4,038	6,249	2,880	3,007	6,664	13,095	7,328	13,550
NATIVE AMERICAN POPULATION	6,904 (94.0%)	2,490 (61.7%)	6,036 (96.6%)	471 (16.3%)	2,832 (94.2%)	5,084 (76.3%)	11,888 (91.0%)	5,688 (77.6%)	2,723 (20.1%)
DATA FOR NATIVE AMERICAN PERSONS									
Median Age (years)	19.9	19.6	19.5	--	17.9	21.1	17.9	17.9	--
Percent Age 0-17	45.1	45.7	46.8	46.5	50.5	43.3	50.2	50.1	49.4
Median Years of School for Persons Age 25+	10.7	12.0	11.1	--	11.3	12.2	10.9	12.0	--
Persons Age 16+ in Civilian Labor Force: Percent Unemployed	14.4	10.8	15.8	37.1	24.6	14.7	22.0	18.5	20.8
Percent of Persons with 1979 Income Below Poverty	46.3	34.3	47.6	25.7	28.7	36.2	47.9	49.2	51.3
DATA FOR NATIVE AMERICAN FAMILIES									
Families with Children Age 0-17	817	352	762	85	364	747	1,491	851	344
% Headed by Married Couple	63.6	60.8	73.2	65.9	45.1	70.1	59.6	58.3	41.6
% Female Headed	29.4	27.0	23.8	22.4	46.4	21.2	30.9	36.8	50.9
Median Family Income in 1979 for Families with Children Age 0-5,									
Couple-headed ($)	12,411	14,500	8,036	13,906	12,083	9,149	11,583	12,553	--
Female-headed ($)	5,524	2,499	4,423	2,499	5,037	2,499	5,944	4,811	--
Families with Children Age 0-17 Below Poverty in 1979:									
Percent of All Families with Children 0-17	45.3	31.3	49.8	23.0	31.7	34.8	52.4	51.3	0.5
Percent of Female-headed Families with Children 0-17	54.1	54.1	80.5	94.7	43.7	39.6	66.5	66.3	61.9

Source: 1980 Census data from the American Indian/Alaska Native Data Base developed by CSR, Incorporated for the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.

[1] These reservations were visited for the purpose of obtaining information on Bureau of Indian Affairs child welfare programs. The remaining reservations were visited to obtain information on tribal child welfare programs.

obtain information on child welfare services and practices, on problems encountered and successes achieved in implementing the ICWA, and on adherence to the Indian Child Welfare Act and relevant portions of the Adoption Assistance and Child Welfare Act (Public Law 96-272). Interviews averaged an hour.

In each state, the State director of child welfare was interviewed to obtain information about substitute care services in the state generally, and especially in relation to Indian children and families. The State-level child welfare official responsible for monitoring implementation of the Indian Child Welfare Act and coordinating tribal contracts and interactions was interviewed to obtain information on the State's relationships and agreements with Indian tribes and their child welfare programs.

In each local public agency, the child welfare program director provided information on the services to Indian families and children and on procedures used to fulfill the requirements of the Indian Child Welfare Act and Public Law 96-272. The State juvenile or family court judge in each agency's jurisdiction who handles the largest number of Indian substitute care cases was interviewed regarding procedures used to comply with the Indian Child Welfare Act and information on the court's Indian caseload.

Interviews with officials at tribal, BIA and off-reservation sites paralleled those conducted with public agency officials. At each tribal field study site, the tribal leader and child welfare director and a tribal court judge were interviewed. At BIA agencies, respondents were the head of agency social services and a tribal judge who hears child welfare cases served by that agency. The director of the child and familiy services program was interviewed at each off-reservation Indian center, as was a State court judge in that jurisdiction who handles Indian child welfare cases.

The second data collection effort for the field study was the extraction of information from substitute care case records. These records were reviewed to examine child welfare services provided, characteristics of children in care, and adherence to provisions of the Indian Child Welfare Act and Public Law 96-272. The goal was to obtain between 70 and 84 case records in each state. Numbers reviewed in each site varied because of the differing numbers of Indian children in care. In three off-reservation programs, case records were not available because staff were not providing case supervision for children in substitute care. To compensate for this, more cases were reviewed in sites with more children in care.

Records were selected using modified stratified sampling. Cases were stratified by open or closed status. Open cases were selected randomly from a listing of all open Indian cases. Closed cases were selected beginning with the most recent cases and selecting in reverse chronological order until all needed cases were selected. Adoptive cases were oversampled, if necessary, to obtain two open cases with a goal of adoption and two cases closed as a result of adoption. For both open and closed cases, when more than one child from a family was in care, only one case record from the sibling group was reviewed. A total of 177 open and 162 closed case records were reviewed. Of these, 48 were adoptive cases.

The number of interviews conducted and case records reviewed at each site is presented in Table 4-4. Characteristics of the children in public, tribal and BIA care whose case records were reviewed are summarized in Table 4-5.

A pre-test of the field study methodology and instruments was conducted in Oklahoma in September 1986. The field study itself was conducted in the summer of 1987 by senior staff of CSR, Incorporated and Three Feathers Associates.

Table 4-4

Field Study Interviews Conducted and Case Records Reviewed

Sites	Interviews Conducted					Case Records Reviewed	
	State Child Welfare Director	State Indian Child Welfare Liaison	Child Welfare Program Director	State or Tribal Court Judge	Tribal Leader	Open Cases	Closed Cases
ARIZONA							
State Child Welfare Agency:							
Arizona Department of Economic Security	1	1					
Public Programs:							
1. AZ DES - Flagstaff District			1	1		9	10
2. AZ DES - Phoenix District			2	1		15	7
3. AZ DES - Tucson District			1	1		6	5
Tribes:							
1. Gila River Pima-Maricopa			1	1	1	6	10
2. Salt River Pima-Maricopa			1	1	1	9	10
Off-Reservation Indian Program:							
Phoenix Indian Center			1	(same as Phoenix District)		0[a]	0[a]
BIA Agency:							
San Carlos			1	0		0[b]	0[b]
Subtotals: Public	1	1	4	3		30	22
Indian			4	2		15	20
Totals	1	1	8	5	2	45	42

Total Case Records: 87

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[a] The program did not provide substitute care.
[b] Access to records was denied by the tribal council.

Table 4-4 (continued)

Field Study Interviews Conducted and Case Records Reviewed

	Interviews Conducted					Case Records Reviewed	
Sites	State Child Welfare Director	State Indian Child Welfare Liaison	Child Welfare Program Director	State or Tribal Court Judge	Tribal Leader	Open Cases	Closed Cases
MINNESOTA							
State Child Welfare Agency:							
Minnesota Department of Human Resources	1	1					
Public Programs:							
1. Beltrami County Social Services			1	1		6	6
2. Carlton County Human Services			1	1		6	6
3. Ramsey County Community Human Services Department			1	1		6	6
Tribes:							
1. Fond du Lac Band of Minnesota Chippewa Tribe			1	1	1	9	6
2. Red Lake Band of Chippewa			1	1	1	10	6
Off-Reservation Indian Program:							
St. Paul American Indian Center			1	(same as Ramsey County)		7	4
BIA Agency:							
Red Lake			1	(same as Red Lake Tribe)		0[c]	0[c]
Subtotals: Public	1	1	3	3		18	18
Subtotals: Indian			4	2	2	25	16
Totals	1	1	7	5	2	43	34

Total Case Records: 77

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[c] Records were not provided.

Table 4-4 (continued)

Field Study Interviews Conducted and
Case Records Reviewed

Sites	Interviews Conducted					Case Records Reviewed	
	State Child Welfare Director	State Indian Child Welfare Liaison	Child Welfare Program Director	State or Tribal Court Judge	Tribal Leader	Open Cases	Closed Cases
OKLAHOMA							
State Child Welfare Agency:							
Oklahoma Department of Human Services	1	1					
Public Programs:							
1. OK DHS - Caddo County			1	1		8	8
2. OK DHS - Comanche County			1	1		6	5
3. OK DHS - Osage County			1	1		7	6
Tribes:							
1. Cheyenne & Arapaho			1	1	1	9	10
2. Comanche			1	1	1	6	5
Off-Reservation Indian Program:							
Indian Health Center (Tulsa)			1	1	1	0[a]	0[a]
BIA Agency:							
Anadarko			1	(same as Cheyenne & Arapaho Tribe)		2	2
Subtotals: Public	1	1	3	4		21	19
Indian			4	2	2	17	17
Totals	1	1	7	6	2	38	36

Total Case Records: 74

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[a] The program did not provide substitute care.

Table 4-4 (continued)

Field Study Interviews Conducted and Case Records Reviewed

Sites	Interviews Conducted					Case Records Reviewed	
	State Child Welfare Director	State Indian Child Welfare Liaison	Child Welfare Program Director	State or Tribal Court Judge	Tribal Leader	Open Cases	Closed Cases
SOUTH DAKOTA							
State Child Welfare Agency:							
South Dakota Department of Social Services	1	1					
Public Programs:							
1. SD DSS - Mission			1	(same as Rosebud Sioux Tribe)		7	7
2. SD DSS - Pine Ridge			1	(same as Pine Ridge BIA)		9	9
3. SD DSS - Sioux Falls			1	1		6	7
Tribes:							
1. Rosebud Sioux			1	2	1	6	7
2. Sisseton-Wahpeton Sioux			1	1	1	6	6
Off-Reservation Indian Program:							
American Indian Services, Inc. (Sioux Falls)			1	(same as Sioux Falls DSS)		0[d]	0[d]
BIA Agency:							
Pine Ridge			1	1		8	8
Subtotals: Public	1	1	3	1		22	23
Indian			4	4	2	20	21
Totals	1	1	7	5	2	42	44

Total Case Records: 86

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[d] Does not have custody of any children. Provides services under DSS or tribal supervision.

Table 4-4 (continued)

Field Study Interviews Conducted and
Case Records Reviewed

Sites	Interviews Conducted					Case Records Reviewed	
	State Child Welfare Director	State Indian Child Welfare Liaison	Child Welfare Program Director	State or Tribal Court Judge	Tribal Leader	Open Cases	Closed Cases
MONTANA							
BIA Agency:							
Blackfeet			1	1		9	6
Totals	0	0	1	1	0	9	6

Total Case Records: 15

Table 4-5

Child Characteristics from Substitute Care Case Records Reviewed for Field Study

	Public Program Records (N=173)	Tribal Program Records (N=121)	BIA Program Records (N=35)
	%	%	%
Case Status			
Open	52.6	50.4	54.3
Closed	47.4	49.6	45.7
Gender			
Male	49.7	39.7	54.3
Female	48.0	60.3	45.7
Unable to Determine	2.3	0	0
Age			
Under 1 Year	2.9	1.7	11.4
1 to 3 Years	22.5	20.0	14.2
4 to 6 Years	19.7	15.7	0
7 to 9 Years	10.4	14.0	28.6
10 to 12 Years	5.8	9.0	8.6
13 to 15 Years	16.2	19.0	8.6
16 to 17 Years	12.1	11.6	8.6
18 Years or Older	6.4	2.4	11.4
Unable to Determine	4.0	6.6	8.6
Median Age (in years)	7.6	9.2	8.3
Indian Blood Quantum			
Less than 1/4	2.9	0.9	0
1/4 but less than 1/2	9.8	11.1	11.4
1/2 but less than 3/4	15.6	12.0	22.9
3/4 but less than 4/4	2.9	1.7	28.6
4/4	2.9	11.1	5.7
Unable to Determine	65.9	63.2	31.4
Handicap			
Mental	6.4	6.8	0
Physical	8.7	3.4	5.7
Emotional	8.7	6.8	5.7
Other	3.5	5.1	11.4

Table 4-5
(continued)

	Public Program Records (N=173)	Tribal Program Records (N=121)	BIA Program Records (N=35)
	%	%	%
Primary Caregiver Before Substitute Care			
Parents	27.7	23.1	28.6
Parent and Step-parent	11.0	11.1	11.4
Mother only	45.7	41.0	48.6
Father only	5.2	6.0	2.9
Non-parent Relative	9.8	13.7	5.7
Unable to Determine	0.6	5.1	2.9
Primary Reason for Placement in Substitute Care			
Physical Abuse	17.9	5.8	2.9
Sexual Abuse	6.4	3.3	5.7
Neglect	21.4	24.0	34.3
Abandonment, Unwillingness to Care for Child	21.4	25.6	22.9
Parent Alcohol or Other Drug Abuse	16.2	14.9	17.1
Parent Financial Hardship, Lack of Housing	0.6	1.7	0
Other Parent Condition (e.g., illness, death, incarceration)	2.3	2.5	0
Child Status Offenses, Unruliness	7.5	14.0	11.4
Child Disability or Hardship	1.7	0.8	0
Other Reason	4.6	2.5	0
Unable to Determine	0	5.0	5.7
Parent Alcohol or Other Drug Abuse is a Secondary Reason for Placement	26.0	24.0	31.4

Chapter 5

Public Child Welfare Services

In its 1976 report, Indian Child Welfare: A State-of-the-Field Study, the Center for Social Research and Development at Denver University documented a number of legal, jurisdictional, cultural and other barriers to the effective delivery of public child welfare services to Indians. Many provisions of the Indian Child Welfare Act were intended to correct problems that are summarized in the following paragraphs and are identified in that report.

The U.S. Constitution acknowledges, and subsequent Federal laws and court decisions affirm, that Federally recognized Indian tribes are vested with rights of self-government that supercede many powers of the states in which those tribes are located. Tribal governments on Indian lands thus perform many of the functions that are exercised elsewhere by State governments, including civil and criminal law enforcement through tribal police forces and courts.

While acknowledging the sovereignty and rights to self-determination of Indian tribes, the Federal government also has acknowledged obligations to the Indian people in treaties dating from 1784 and in laws enacted by Congress. This includes the obligation to provide services to Indians, including child welfare services, to the same extent as they are provided to other citizens.

The Social Security Act assigns responsibility for the administration of child welfare services to the States, who in turn are obligated to serve all children in need, including Indian children. However, although the configuration of State versus tribal jurisdiction varies from state to state, tribe to tribe and issue to issue, the protected sovereignty of Indian tribes generally precludes State jurisdiction on Indian lands.

In 1953, Public Law 280 transferred jurisdiction over civil and criminal matters occurring on most of the Indian lands in five States from the tribes to the States. It also empowered other States to pass laws assuming jurisdiction on Indian lands. Eventually, 14 States had partial or full jurisdiction over some or all of the Indian territory within their boundaries. At least temporarily, assumption of child welfare-related powers under P.L. 280 settled the jurisdictional issue on some Native American lands in some states.

In the rest of the country, however, the fact that States were to provide child welfare services in areas over which they had no jurisdiction continued to create significant problems. For example, on reservations where tribal jurisdiction related to child welfare had not been abridged by P.L. 280 or related State laws, tribal laws on these matters were to be observed and local public agencies were to work in support of the tribal courts. However, many tribes had not adopted laws governing child welfare and were not exercising their jurisdiction. At the same time, few public child welfare agencies were informing tribal courts when cases involving reservation children came to their attention. Frequently, reservation Indians did not receive court-related services from public agencies unless they went off their reservation to obtain them. Further, State courts and institutions often declined to recognize orders by tribal courts, including adoption decrees.

Jurisdictional issues also affected the use of Indian homes as substitute care placements for Indian children in State care. Initially, foster homes had to be approved by the State to be eligible for Federal reimbursement. Because the State had no jurisdiction to license homes on reservations, such placements were not available. Federal regulations then allowed reimbursement for tribally approved homes, but tribal procedures for granting such approval were slow in being developed, resulting in the continued placement of reservation children in off-reservation, usually non-Indian, homes.

Lack of State jurisdiction over Indian lands affected delivery of child welfare services to reservation Indians in at least two additional ways. First, the fact that a State would have no power to sue tribal governments to recover any inappropriately spent funds discouraged many States from contracting with tribes to deliver services on reservations. Second, because States cannot raise revenues on Indian lands through property or income taxes, they often declined to provide the 25 percent local funds to match the 75 percent Federal share for Title XX services.

Responsibility without jurisdiction was not the only issue impeding public programs' delivery of effective child welfare services to Native Americans. Cross-cultural differences also played a major role. As stated by Congress in the preamble to the Indian Child Welfare Act, in child custody issues, "the States ... have often failed to recognize the essential tribal relations of Indian people and the cultural and social standards prevailing in Indian communities and families." The failure to recognize the cultural significance of many Indian customs diminished the effectiveness of State services to this population. When cultural misunderstanding resulted in the unwarranted removal of children from their families, public child welfare services became a destructive force in the lives of Indian children. The other side of the cross-cultural problem is that Indians often mistrusted public systems and declined to make use of their services.

Against this backdrop, the Indian Child Welfare Act (ICWA) was adopted. Nearly a decade later, the present study has explored the current status of Indian child welfare. For the field study portion of the project, 12 local public child welfare programs were visited in 4 states. At each site, child welfare and State court officials were interviewed and child welfare case records were reviewed. Information on the sites and the data collection procedures is given in Chapter 4, as are characteristics of the children whose care records were reviewed.

Organization of the Chapter

In this chapter we present information on the provision of child welfare services to Native American children and families by State and local public child welfare agencies. The Information is organized into four sections. The first describes the implementation of the ICWA in our four field study states: Arizona, Minnesota, Oklahoma and South Dakota. The second presents indications, or lack thereof, that an awareness of cultural issues is affecting public agency actions with respect to Indian children and families. The third examines child welfare personnel and service resources. The final section describes substitute care casework practices applied to cases involving Indian children.

In all four sections, information is presented in a question-and-answer format. The four sections and the questions addressed in each are listed below. Following that is a summary of the findings discussed in the chapter. The detailed presentation of findings begins after the summary.

A. Implementation of the Indian Child Welfare Act

1. What policies, procedures and activities have public child welfare programs developed to implement the provisions of the Indian Child Welfare Act? What State-Tribal agreements or contracts regarding the delivery of child welfare services have been developed? How do State court judges discharge their responsibilities under the Act? What training have they had on implementing the Act and how is their adherence to its provisions monitored?

2. How do the parties to State-Tribal agreements or contracts view these arrangements?

3. How do tribal, Bureau of Indian Affairs and off-reservation Indian center officials characterize their interactions with State courts?

4. When an Indian child is involved in custody proceedings in a State court, do public child welfare agencies notify the child's parents and tribe of the pending proceedings?

5. What issues arise with respect to the transfer of custody proceedings involving Indian children from State to tribal jurisdiction? How frequently do State courts fail to transfer jurisdiction when requested and for what reasons?

6. How often do States and tribes arrange concurrent jurisdiction? How frequently do cases involve interstate compacts?

7. What do public officials understand the Indian Child Welfare Act's "full faith and credit" provision to mean? Do State courts give full faith and credit to tribal records and court rulings?

8. What procedures are followed to determine if an Indian parent is indigent and therefore has the right to court-appointed counsel? How frequently are Indian parents represented by such counsel?

9. How frequently is testimony by expert witnesses used in proceedings where foster care placement or termination of parental rights is ordered? What types of people appear as expert witnesses?

10. When an Indian parent voluntarily consents to a substitute care placement or to termination of parental rights, how do State courts assure that the consequences of that consent are explained in a language the parent understands? How frequently are interpreters used? What has been the outcome when parents have withdrawn voluntary consent to placement or termination?

11. Are the appropriate orders of preference for foster care and adoptive placements followed?

12. What factors promote effective implementation of the Indian Child Welfare Act?

13. What factors impede implementation of the Indian Child Welfare Act?

14. What additional training related to the Indian Child Welfare Act do tribal, Bureau of Indian Affairs and off-reservation Indian center officials believe that public program staff need?

15. What impact has implementation of the Indian Child Welfare Act had on public child welfare programs and State courts?

B. Cultural Awareness

1. What types of training have public program child welfare caseworkers received on Indian culture and family life and their implications for casework practice? How do tribal, Bureau of Indian Affairs, and off-reservation Indian center officials evaluate public program staffs' understanding of Indian needs and values?

2. Do public programs have bilingual staff or interpreters available for Indian parents who do not speak English? How often are they used as interpreters?

3. Have public programs reviewed their foster home licensing requirements for compatibility with Indian cultural and social standards?

4. How prevalent are examples of public programs or workers demonstrating either discriminatory or culturally insensitive practices?

C. Staffing and Services of Public Child Welfare Programs

1. What are the staff characteristics of public child welfare caseworkers? Are certain caseworkers designated to handle cases of Indian children and families? What proportion of public programs' total substitute care caseload are Indian children?

2. What services are provided to Indian children and families by public child welfare programs? For what services do the programs make referrals?

3. How many Indian foster homes are available for children in public care? What efforts do public programs make to recruit Indians as foster and adoptive parents?

4. Do public programs encounter any special problems in meeting the requirements of the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) when Indian children or families are involved?

5. What do tribal, Bureau of Indian Affairs, and off-reservation Indian center officials regard as the strengths and weaknesses of the services provided to Indian children and families by the public programs in their areas?

D. Substitute Care Casework Practices

1. What efforts do public child welfare programs make to prevent placing Indian children in substitute care?

2. When Indian children must be placed in substitute care, into what types of settings are they placed?

3. What goals for permanency are established for Indian children in out-of-home care?

4. What proportion of Indian children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

5. By whom and how often are cases reviewed?

6. How long do Indian children in the care of public child welfare programs remain in substitute care? How many different placements do they have while in care?

7. What are the outcomes for Indian children who leave public substitute care? For what proportion of children who are adopted are adoption subsidies provided?

Summary of Findings

This study explored many complex issues related to implementation of the Indian Child Welfare Act by State and local public child welfare agencies and State courts. It also collected extensive interview and case record data concerning the delivery of public child welfare services to Indian children and families. A summary of findings on these issues is presented in the next several pages.

A. Implementation of the Indian Child Welfare Act

Overview of ICWA Implementation Efforts in the Four States

Efforts by the public child welfare programs to implement the provisions of the Federal Indian Child Welfare Act have taken several forms. First, all four states in the field study have developed or amended their child welfare manuals to help interpret the ICWA and specify procedures for its implementation.

Training of staff on the ICWA is another activity undertaken by the States. The training has varied considerably within and across the State agencies. While all States have sponsored training sessions, this apparently occurred most consistently in the years immediately following passage of the Act, except in Oklahoma which initiated statewide training only in 1986. Responsibility for training local program staff tends to rest with the local agencies, which show different levels of effort and types of resources devoted to the topic. Seven of the 12 local administrators (3 each in Arizona and Oklahoma, 1 in Minnesota) said that all their staff had received training on the ICWA, and three others indicated that most staff were trained on it. In at least two local offices, other than initial orientation, training occurs on a case-by-case basis.

As a result of the Federal ICWA, Minnesota and Oklahoma each hired a State-level Indian child welfare liaison. These individuals help to guide implementation of the Act and to develop agreements with and/or funding sources for tribal programs. At the local level, some agencies in Minnesota and Oklahoma added Indian caseworkers to their staff. Although not in response to the Federal legislation, Arizona assigned a new State-level employee to work with Indian tribes in the State.

In addition to hiring Indian child welfare liaisons, Oklahoma and Minnesota passed their own State laws pertaining to Indian child welfare. The Oklahoma law, passed in 1982, clarifies and supplements the Federal law, provides funding for implementation, and requires notification of the tribe for voluntary placements. The Minnesota Indian Family Preservation Act of 1985, while reinforcing certain provisions of the Federal ICWA, focuses on pre-placement prevention services and includes protection for parents who voluntarily place their children. Respondents in both states felt the State law makes the Federal law more explicit and has more influence on local agencies and State judges.

Approaches to monitoring ICWA implementation by local child welfare agencies include routine case reviews (Arizona and South Dakota); State-level reviews of Indian cases (Oklahoma and South Dakota); and use of VCIS data, a pilot quarterly child-family reporting system, and a special county-by-county review in 1987 (Minnesota). South Dakota has developed an ICWA Fact Sheet (with tribal affiliation, blood quantum, names of extended family members, etc.) that is included in every Indian child's case record and also maintains a statewide information information system that provides monthly data on Indian children in care.

Arizona, Oklahoma, and South Dakota have purchase-of-service arrangements to give tribal programs direct access to Title IV-E monies to pay for foster care services provided by foster families. Oklahoma's agreements with 12 tribes also include use of Title IV-B and State funds.

In addition to providing Title IV-E funds, Arizona's contract with the Gila River Pima-Maricopa Indian Community facilitates access to services and staff training, while South Dakota's contract with the Sisseton-Wahpeton Sioux Tribe provides for a wide range of child welfare services to support implementation of P.L. 96-272. A comprehensive child welfare agreement proposed to other South Dakota tribes has not yet received any response.

Minnesota contracted State Title IV-B funds to tribes from 1982 to 1986. In June 1987, $1.5 million over a 2-year period was authorized for direct grants that have been awarded to Indian tribes and organizations for child welfare programs and services.

Among the 11 State court judges interviewed, six (mostly from Minnesota and Oklahoma) have received some training related to implementation of the ICWA. Three judges have given training on the ICWA to public agency caseworkers (Arizona) and tribal staff (Minnesota). To determine whether or not a child is subject to the ICWA, judges usually rely on information provided by the public child welfare agency or the child's parent(s).

Mechanisms to monitor adherence by the State courts to the Act include oversight by the Attorney General designated as a specialist on the Act (Arizona), review of ICWA cases by the State Foster Care Review Board and, as necessary, recommendations to the courts involved (Arizona), and interactions with the public child welfare agency on specific requirements of the Act (Oklahoma and South Dakota).

Assessments of State-Tribal Agreements

Where State-Tribal agreements have been developed, both State-level officials and tribal administrators view the agreements positively. They improve coordination and trust between the State and tribe, reflect a respect for tribal sovereignty and the provisions of the ICWA, and help develop tribal services for children. Some problems were identified with implementation of the agreements in Arizona, Oklahoma and South Dakota, including late payments to the tribes for foster care services and the tribes' maintenance of proper records.

Interactions with State Courts

Tribal executives described the relationship and interactions between State and tribal courts in generally favorable terms. Off-reservation program respondents indicated that enforcement of the Act very much "depends on the judge." One of the three BIA respondents who interact with State courts expressed dissatisfaction about State courts' placing children and expecting the BIA agency to pay for placements.

Notification of Child's Parents and Tribe in Pending Custody Proceedings

Adherence to the notification requirement involves three steps, each with its attendant problems: identifying that the child is Indian; identifying the appropriate tribe or band to notify; and determining if the child is enrolled or is eligible to enroll in the tribe. Public programs and State courts assume these responsibilities. Lack of and delays in notification were cited as problems by some tribal respondents.

Of the 173 case records reviewed in the 12 local public child welfare programs, 126 (73 percent) were under the jurisdiction of the State. Among the 126 records, 60 percent contained a copy of the notice to parents of early custody proceedings; 5 percent had a notation that the notice had been sent; 21 percent revealed nothing about notification (although in 4 of these cases, the parent(s) attended the custody hearing); and in 14 percent, the status of parent notification could not be determined.

About 20 percent of the case records showed no evidence of notification to the tribe or tribal awareness of the proceedings. Incomplete documentation in the record may be inflating these non-compliance figures. However, three of the eight tribal child welfare program administrators interviewed knew of from one to five cases in the past 2 years where their tribe should have been notified and was not. The case record data and respondent comments suggest that parents and tribes are not receiving the required notification consistently.

Transfer of Custody Proceedings from State to Tribal Jurisdiction

Two primary issues emerged from the interviews regarding transfer of jurisdiction. One is the pattern of State courts automatically transferring cases to tribes, whether or not the tribe has requested jurisdiction. This practice was observed by both tribal and BIA respondents as a means for the State to "escape financial responsibility" or to "get rid of Indian children." The second issue is the reverse situation: State courts failing to transfer jurisdiction when petitioned by the tribe. Tribal and BIA respondents in three states spoke of obstacles presented by public officials to block requested transfers.

Three of the eleven State court judges had declined to transfer jurisdiction in one case each. The "good cause" reasons underlying these decisions included the length of time between the public agency assuming custody and the tribe's request and the absence of a tribal court. Four of the eleven tribal and Court of Indian Offenses judges know of a total of nine cases for which their tribes' requests for transfer were denied. All of these denials came from courts located in a different state from the petitioning tribe. The reasons cited by respondents for not transferring these cases included ignorance of the ICWA, lack of tribal funds to return the child, a claim that the reservation home was unfit, State recognition of "an informal adoption," and holding a child until the mother was released from prison.

Among the 126 cases of children in public care under State jurisdiction that were reviewed, transfer to tribal jurisdiction had been requested for 23 (18 percent). Parents objected to the transfer in five of these cases. Of the remaining 18, jurisdiction had been or was being transferred for 13 and had been denied for 5, for reasons that were mixed or could not be determined. Thus, 72 percent of the requests for transfer of jurisdiction that had not met with parent objection had been honored by the courts.

Concurrent Jurisdiction; Use of Interstate Compacts

Joint State-Tribe jurisdiction rarely occurs, based on the cases reviewed in both state and tribal programs (2 out of 294 records).

Tribal governments are not eligible at this time to be parties to the Interstate Compact on the Placement of Children (ICPC) that governs situations in which a child is placed in care in another state. Because of this, tribes seeking to place children under their jurisdiction in substitute care settings in other states may encounter reluctance from those states' child welfare agencies to assume supervisory responsibility. Officials in two of the study states have explored developing agreements with the tribes to enable them to place children under the ICPC. In a third State, some tribes have requested that the State agency arrange placements on the tribes' behalf.

Understanding and Giving "Full Faith and Credit" to Tribal Records and Court Rulings

Public program and judicial respondents were asked for their interpretation of the ICWA provision that Indian tribes' "public acts, records and judicial proceedings" relating to child custody matters be given "full faith and credit" (that is, be regarded as valid and binding). All State-level officials, 9 of the 12 local public administrators, and 9 of the 11 State court judges gave appropriate interpretations of this provision. Other respondents tended to confuse the provision with jurisdictional matters or simply did not know what it meant. None of the judges has ever not honored a tribal court's ruling.

Five of the eleven tribal court judges were aware of instances in which their tribe's proceedings or rulings were not given full faith and credit. A total of ten cases were cited, only one of which involved a State court in the four field study states.

Indigency and the Right to Court-appointed Counsel

Procedures employed to determine if an Indian parent is indigent and therefore has the right to court-appointed counsel primarily rely upon parents completing a financial affidavit or being asked about their financial situation (8 of the 11 State court judges). The same procedures often apply to non-Indians as well. The frequency with which indigent Indian parents had been represented by court-appointed counsel in the past year ranged from 0 to 95 percent of the cases heard by the 11 judges.

Among the 126 case records of children in public care under State jurisdiction, 56 percent showed that parents were represented in early custody proceedings; for 29 percent, this could not be determined. These data do not reflect the parents' financial situations and whether legal representation came from court-appointed counsel.

Use of Expert Witnesses

The use of expert witnesses in cases involving involuntary substitute care varies considerably--from 0 to 100 percent of the cases heard during the past year in 9 of the 11 jurisdictions. Three judges who did not use expert witnesses had ordered substitute care for 2, 5, and 10 to 15 Indian children, respectively. The former judge said no testimony was called for because both mothers admitted the offenses. The latter judge erroneously said that expert witnesses are required only for termination of parental rights (TPR). Of the six judges who had heard TPR cases in the past year, three had ruled for termination in a total of six cases, all of which involved the use of expert witnesses.

Expert witnesses tend to be either State or tribal social workers, although mental health or medical professionals also were among those named. Of the 11 tribal judges, only one knew of any instance in which a tribal social worker or other child welfare official sought to testify but was not accepted by the State court.

Voluntary Consent and the Use of Interpreters

Of the 9 judges who had been involved in voluntary proceedings during the past year, 7 had presided over an estimated total of 40 to 45 voluntary substitute care placements and 20 voluntary terminations of parental rights. Those judges reported that they fully explained to the parents their rights and the consequences of their actions and questioned parents to ascertain if they understood what they were doing. The other two judges, who did not know the number of voluntary cases over which they had presided, simply spoke of going over a form or making "judicial inquiry." Voluntary consent had not been withdrawn in any of the cases except one, which turned out not to be subject to the ICWA.

Interpreters were used in only 2 of the 11 courts during the past year and then, in only 3 cases.

Following the Order of Preference for Substitute Care and Adoptive Placements

Public child welfare program officials and judges in the same state, even in the same jurisdiction, gave different reports on how well the order of preference is being followed for substitute care placements. These discrepancies appear to reflect a failure to monitor what is occurring with regard to Indian placements.

Problems associated with implementing the order of placement preference include lack of Indian foster homes, State policies that require State licensing of homes in addition to tribal licensing or approval, and the suitability of some extended family homes.

Data from the mail survey reveal that 79 percent of Indian children in public care were in family settings (i.e., foster homes or non-finalized adoptive homes). Of those in foster homes for which data were reported, 35 percent were in Indian homes. In the field study, 86 percent of the children in public care whose records were reviewed were in family placements, and 24 percent of these were in relatives' homes. Among children in public care under State (as opposed to tribal) jurisdiction, 88 percent were in family settings and 22 percent of these were with relatives.

Too few data on families who adopt Indian children are available to draw conclusions about adherence to the order of adoption placement preference specified in the Act. Only 28 public program case records--not randomly sampled--were reviewed for children who had been or were to be adopted, and the race of the adoptive parents could be determined for only 15 of these.

Factors That Promote Effective Implementation of the Act

Public program and judicial respondents identified several factors that contribute to successful implementation of the ICWA: the commitment of public agency staff to implementation; positive relationships established among public agencies or officials and Indian tribes and/or organizations; the passage of Federal statutes; and judges' education on and awareness of the Act.

Tribal and BIA program respondents echoed the role of good relationships with State and local staffs in enhancing implementation of the Act. They also cited the passage of a State Indian child welfare law; the development of tribal child welfare programs and services; training and technical assistance to help develop those programs; and the recognition of the importance of tribal self-determination, self-sufficiency, and preservation of its members.

Factors That Impede Implementation of the ICWA

Implementation problems identified by public agency and judicial respondents include: lack of experience in working with the tribes; unfamiliarity with or antipathy toward the ICWA; low proportion of Indian cases in some localities; turnover of staff; prejudice against Indians; lack of tribal resources; and concern about tribal accountability in providing services and caring for the children.

Among tribal, BIA, and off-reservation Indian center officials, the two most recurrent problems in implementing the Act are lack of sufficient funding for tribal child welfare services and proceedings and resistance of some public officials to the Act. Other hindrances include the paperwork involved, the lack of knowledge of the Act on the part of public agencies in some areas with few Indians, and the fact that not all tribes have tribal courts that can take jurisdiction over proceedings involving their members.

Additional Training That Tribal, BIA, and Off-Reservation Respondents Believe Public Agency Staff Need

Twelve of the seventeen tribal, BIA, and off-reservation program respondents believe that public agency staff are not adequately trained on the ICWA and related topics. Training or updating is needed on the purpose and basic requirements of the Act, State-tribe jurisdictional issues, notification procedures and standards of proof, among other topics. In addition, respondents recommended training on tribal structure and tribal government functions; State-tribal court and social service systems interactions; and working with Indian families and the Indian community.

Impact of the Act on Public Child Welfare Programs and State Courts

Impacts of ICWA implementation named most frequently by public program respondents were increased awareness of and greater knowledge about Indian culture; changes in policies and procedures based on that increased understanding; hiring of Indian staff members in local programs and Indian child welfare specialists at the State level; improved relationships with tribes and tribal child welfare programs; and an increase in required procedures and paperwork.

A few State judges said the Act had little or no impact on the court system. Others spoke with some concern about the Act's requirements for transfer of jurisdiction to the tribe and standards of proof for termination of parental rights. These concerns relate to the protection of Indian children. According to some judges, a child's interest is not protected by transfer of that child to a tribe with no court system or an ineffectual service program, or by prolonged, even permanent foster care for a child whose parents seem not to care about reunifying.

No clear picture emerges as to whether the Act has had an impact on the number of Indian children in public custody or where those children are placed. Some administrators cited benefits to non-Indian children resulting from heightened sensitivity to the preservation of a child's cultural heritage and increased emphasis on looking for relative placements.

B. Cultural Awareness

One intent of the ICWA is to correct the failure of the states "to recognize the ... cultural and social standards prevailing in Indian communities and families" as regards child custody issues. The extent of training on the implications of Indian culture for child welfare casework is uneven across the four field study states. While officials in three of the State agencies said the agencies have provided sessions related to this topic, few of the local program administrators mentioned the State as a source of staff training. Most of the staff in all but two local agencies apparently have had some training on working with Indian families, occasionally provided by Indian trainers. The responsibility for addressing the needs of staff for training on cultural differences appears to rest primarily on local program administrators.

Half of the tribal, BIA, and off-reservation program respondents felt that public child welfare staff in their areas do not understand Indian needs and values. Examples cited include evaluating Indian homes by non-Indian standards, failing to understand the value of involving extended family in working with a child, and reacting negatively to the use of traditional rites in a child's burial service.

All local program administrators in Arizona and South Dakota reported having either bilingual staff or translators available. Use of this resource varies from "daily" to "once or twice a year or less." In Minnesota and Oklahoma, the administrators said they did not have translators available, but all three Minnesota respondents identified a source for such services if needed.

Only South Dakota has reviewed its foster home licensing requirements for compatibility with Indian cultural and social standards. Another state is planning to do so if State funding enables hiring an additional staff member.

C. Staffing and Services of Public Child Welfare Programs

Staff Characteristics and Caseloads

The number of child welfare staff in the 11 public programs providing data ranges from 4 to 63. Eight of the programs have at least one Native American staff member. Indian families can be assigned to any caseworker on the staff. Six of the programs have at least one MSW and, in two programs, at least half of the staff have a Bachelor's or Master's degree in social work. In all programs except one, staff have at least 4 years of experience in child welfare. Proportions of Indian children in the total substitute care caseloads are: 5 to 10 percent in two programs; 10 to 25 percent in five programs; 48 to 50 percent in two programs; and 67 to 100 percent in three programs.

Services Provided and Referred

Programs typically provide caseworker counseling, family counseling, child care, and transportation services directly to clients. Referrals are made to other social services, such as housing, medical, employment, legal, and educational services.

Foster Homes

Except for public programs located on reservations, the programs in the field study have few Indian foster homes available for placement of children (from zero to five homes in seven sites). Applications from Indian families seeking to provide foster homes in the preceding five years number from zero to seven applications in eight sites; most of these have been approved.

State- and local-level efforts to recruit Indian foster or adoptive homes vary widely, ranging from no effort in some places to multi-faceted recruitment programs in others. Strategies include posters and brochures in the predominant tribal language in the state; public service announcements on TV; advertisements in the media; a breakfast hosted by the Governor; agreements with tribes to recruit and refer Indian homes; and working with off-reservation Indian centers, recognized Indian leaders, or Indian organizations to identify candidate families. Exploration of outreach methods that build on Indian norms and traditions has been limited.

Meeting Requirements of P.L. 96-272 When Indian Children Are Involved

Several requirements for public child welfare practices are specified in the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272). Three requirements that some respondents said can be problematic when Indian children are involved are: placing children near their homes, encouraging visitation between parent and child, and conducting periodic case reviews. Difficulties with the first two requirements arise when an Indian child has specialized needs. This may require placement at some distance from the parent's home, and some local programs may refuse to pay transportation costs for visitation in these cases.

Problems with the third requirement occur where cases are heard by tribal courts, because some courts periodically run out of money and must close down. One respondent noted, however, that when tribal courts are operating, they generally review cases on a schedule that exceeds the Federal minimum, making the case review requirement easier to meet than for other children.

When tribes provide child welfare services for the State (e.g., under a IV-E contract), the State must be able to document that tribal services and case records meet the requirements of P.L. 96-272. Officials in two States spoke of problems when tribal recordkeeping falls short of the standards required.

Strengths and Weaknesses of the Services Provided to Indian Children and Their Families by the Public Programs

Tribal, BIA, and off-reservation program respondents most often cited the extensive resources of the public programs (more funds, more staff, more services) as the greatest strength. Other positive aspects are the programs' efforts to build good relationships with Indian programs and the experience and structure of programs to deliver child welfare services.

The most frequently cited weakness was "ignorance of Indian culture and Indian people" that affects casework practices. Lack of Indian foster homes and of Indian staff also were identified as weaknesses in the public programs. Several Indian respondents recognize the funding and staff constraints under which public programs in their areas operate.

D. Substitute Care Casework Practices

Data on public program adherence to case planning and management practices required by P.L. 96-272 were obtained from case records of 173 Indian children in public substitute care that were reviewed during the field study, and from the nationwide mail survey. Findings are summarized below.

- Efforts to prevent the child's removal from the home--usually through counseling by the caseworker--were documented in 41 percent of the reviewed case records.
- In the field study, 86 percent of children in public care were in foster homes, 10 percent were in group homes, and the rest were in other settings. Mail survey data from public programs show fewer children in foster homes (77 percent) and more in group facilities (16 percent).
- In the field study, 75 percent of the children have a case goal that will place them in a permanent family setting (return home--53 percent; relative placement or adoption--each, 11 percent). This compares to 64 percent of Indian children reported in the mail survey (43 percent, 8 percent, and 13 percent, respectively).
- Written case plans appeared in 74 percent of the case records; only 21 percent of the records contained plans that had been signed by the parent(s).
- Voluntary placements occurred in 16 percent of the cases; the majority of these cases (64 percent) included a written agreement with the parent.
- Length of time in care appears below for cases in the mail survey (all of which are open) and for open and closed field study cases for which time-in-care data were available.

	Mail Survey (Open Cases) (N = 3,173)	Field Study Open Cases (N = 90)	Field Study Closed Cases (N = 76)
Less than 6 months	25%	16%	26%
6 to 11 months	16%	22%	26%
12 to 23 months	17%	18%	16%
2 years or more	35%	44%	32%

Children in the field study public programs have been in care longer than those nationwide.

- In the field study, average length of time in care for closed cases is shorter than that for open cases (26 vs. 38 months). Many more closed cases than open cases had a goal of family reunification or relative placement (82 vs. 48 percent).

- Among the 127 case records (73 percent) with information on the last administrative or judicial review, most (85 percent) had been reviewed, usually by the court, within six months of the site visit (for open cases) or the date that the child left care (for closed cases). Considerable variation in the recency of reviews appears among the 12 local programs; the average elapsed time since the last review per program ranges from 1.8 to 9.9 months.

- The average number of different substitute care settings for 169 of the children in the field study was 2.5.

- Outcomes for the 82 children discharged from field study programs show family-based permanency for 68 percent (43 percent returned home; 15 percent placed with relative; 11 percent adopted). This compares somewhat less favorably to the 78 percent of Indian children nationally who were discharged from public programs to a family setting (64 percent returned home; 8 percent placed with relative; 5 percent adopted).

- Use of adoption subsidies was reported in 4 of the 9 adoption cases sampled in the field study and in 31 of the 185 adoptions finalized in public programs during the reporting year in the mail survey.

Detailed Discussion of Findings

Having summarized the findings of the Indian Child Welfare Study concerning implementation of the Indian Child Welfare Act and the delivery of child welfare services to Native American children and families by public programs, we now provide a more detailed discussion of these findings. Information is organized into four sections, and is presented in response to the specific questions listed at the beginning of the chapter.

A. Implementation of the Indian Child Welfare Act

The 95th Congress enacted the Indian Child Welfare Act on November 8, 1978. The Act reaffirms tribal jurisdiction over child custody proceedings involving Indian children living on the tribe's reservation. It also requires State courts to transfer proceedings involving off-reservation children to tribal jurisdiction unless either parent objects or the tribe declines jurisdiction. In cases in which proceedings for substitute care placement or termination of parental rights are conducted in State courts, the ICWA specifies a number of procedural, evidentiary, dispositional, and other standards that must be met. These are designed to safeguard Indian children's affiliations with their culture and heritage and to protect the rights of Indian parents.

In addition to these provisions, the Indian Child Welfare Act authorizes States and tribes to conclude agreements defining roles and procedures with respect to care and custody of Indian children. The most common types of agreements are (1) policy and procedure statements that spell out roles, rights, responsibilities, and mechanisms for interaction and coordination, and (2) purchase-of-service contracts under which the tribe delivers specified child welfare services for the State program. Such contracts usually involve the use of Title IV-E funds to pay for foster care placements made by the tribal program. The IV-E contracting mechanism is described more fully under the first research question in Chapter 6.

Much of the language of the ICWA is directed toward State courts, but in practice, much of the responsibility for carrying out its provisions falls to State and local public child welfare agencies. These programs usually play the primary role in identifying a child's Indian identity, assuring that Indian parents and tribes are notified, searching out placements in line with the Act's specified order of preference, and documenting efforts made to comply with the Act's requirements. Thus, activities designed to comply with the Act are added to child welfare programs' central responsibilities of providing services to prevent the need to remove children from their homes, to facilitate early family reunification when removal has become necessary, and to provide alternative permanency arrangements for children if it becomes clear that reunification is not an attainable goal.

Although public child welfare agencies perform most of the activities required to comply with Indian Child Welfare Act provisions, the role of State courts is significant. Not only do the courts have legal responsibility for assuring that the terms of the Act are met, but they also execute some of the actions required by the Act. It is State court judges, for example, who must transfer cases to tribal jurisdiction or rule that there is good cause not to transfer; who appoint counsel for indigent Indian parents; who must give full faith and credit to tribal proceedings and tribal court rulings; and who must assure that the Act's evidentiary requirements are met.

In the following pages, we present findings from the Indian Child Welfare Study about the implementation of the Indian Child Welfare Act by public child welfare agencies and State courts. The first item, which covers a number of pages, provides a general overview of implementation efforts in the four states visited for the field study component of this project. Other items in this section focus on implementation of specific provisions of the Act.

1. **What policies, procedures and activities have public child welfare programs developed to implement the provisions of the Indian Child Welfare Act? What State-Tribal agreements or contracts regarding the delivery of child welfare services have been developed? How do State court judges discharge their responsibilities under the Act? What training have they had on implementing the Act and how is their adherence to its provisions monitored?**

Efforts to implement the Indian Child Welfare Act vary from state to state. At least one state has made no effort at all. In responding to the mail survey reported in Part I, the director of that state's child welfare agency wrote, "As you know, [State] has no federally recognized Indian tribes and, therefore, has not adopted rules and regulations in response to the ICWA." This position reflects a misreading of the circumstances under which the Act is relevant. The Act applies to any State that has an Indian child involved in proceedings for foster care placement or termination of parental rights, regardless of whether the child's Federally recognized tribe is located. Information received from public programs for the survey indicates that some other states also may have done little to implement this Federal law that has been in effect for nine years.

In contrast, public programs in a number of states have made early and continuing efforts to implement both the letter and the spirit of the ICWA. Various agencies have enacted policies and procedures, established monitoring mechanisms, trained staff, hired Native American staff and consultants, initiated strategies for recruiting Indian foster and adoptive families, negotiated agreements and contracts with tribes and off-reservation Indian-operated agencies, and created ongoing communication channels.

The next several pages describe implementation efforts of public child welfare programs and State courts in the four states visited for the field study. Discussed for each state are State-level implementation efforts, local agency procedures and training, mechanisms for monitoring local agency compliance with the Act, State-Tribal agreements and contracts that have been developed, and actions by State courts relative to ICWA implementation. Two of the four states have passed their own laws pertaining to Indian child welfare, which also are described in this discussion. The information presented comes from interviews with several respondents in each state: the head of the State child welfare program, the person at the State level responsible for addressing Indian child welfare issues, the administrators or casework supervisors of three local public child welfare programs, and from one to four State court judges who hear Indian child welfare cases.

Arizona

The child welfare system in Arizona is State-administered by the Arizona Department of Economic Security (DES). The child welfare service delivery system is organized into six districts that cover the state, each containing one or more offices from which DES child welfare staff work. Arizona has not enacted a State equivalent of the Federal Indian Child Welfare Act. Instead, DES has adopted and implemented policies to ensure that provisions of the Federal ICWA are enforced.

State-level Implementation Efforts

Two State-level child welfare officials interviewed during the field study reported that State policies implementing the Indian Child Welfare Act are promulgated in the DES Policy Manual. This document guides program implementation for all DES Districts and recipients of State funding. The policies govern the manner in which the operations of the DES district offices implement the ICWA. The requirements that are specified in the Act are met insofar as possible. The tribe of the Indian child is notified when it is possible. (In some instances this is difficult, such as when the child is from out of state or when the staff has trouble determining which tribe or tribes may be involved.) State DES staff members and other local social service staff are required to observe the provisions of the ICWA that protect parental rights. Indian placement is required in every case where it is possible. Indian expert witnesses are obtained and the provisions of the Act related to custody rights are observed carefully.

To assure that State and local tribal welfare staff members are adequately prepared to implement the provisions of the ICWA, the State has used a variety of approaches for training field and supervisory workers. These include the following.

- State staff members are encouraged to participate in all training activities conducted at the national level.
- When the Act was first announced, a series of training programs was conducted in each District.
- Local supervisors are expected to provide periodic training on the ICWA to their staffs.
- All new staff members are oriented to the ICWA as part of their overall training. Indian trainers are used in this activity.

Although State officials said no new positions were created in response to the ICWA at the State level, a new staff member was employed and assigned to work with the Indian tribes in Arizona. This staff member was required to meet special standards of experience, background, and education deemed appropriate to the functions to be performed.

Local Agency Procedures and Training

Local foster care administrators interviewed for the field study reported that they are following the State policies related to ICWA enforcement. One administrator noted that the agency has developed a draft memo of understanding between the District office and the Indian tribe in the community. This memo establishes the logistics of delivery of ICWA services and is an attempt to establish an intergovernmental agreement between the tribe and the Arizona government. Another agency administrator described the incorporation of the State standards and the adaptation of local legal forms to enable handling of ICWA cases. In one instance the importance of training that had been provided specific to the ICWA was discussed.

The three local public child welfare administrators reported that all staff had received special training on the ICWA. Types of training reported include:

- Mandatory training for all child protective services workers;
- Supervisor training once per year;
- Voluntary training on how to work with Indian clients; and
- Core training for CPS workers on how to work with cultural differences.

Monitoring Local Compliance

While there is no formal statewide monitoring system for the ICWA, it is the opinion of the DES administration that existing mechanisms provide a degree of control. Under the State policy, routine unit supervisory reviews are conducted of all local child welfare case records. An internal monitoring team at the State level performs regular reviews of case records that are sampled from the District DES agencies. These may include Indian clients. It is believed that these assessments provide adequate supervision of Indian child welfare cases.

State-Tribal Agreements

State-level respondents in Arizona indicated that developing agreements with tribes in the state has considerable importance to insure appropriate management of ICWA activities at all levels. At the time of this study, a formal purchase-of-service arrangement had been established with one tribe--the Gila River Pima-Maricopa Indian Community. Under this arrangement, the tribe provides foster care services under State auspices. The tribe has direct access to Title IV-E monies for foster care maintenance payments that provide

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for institutional care for 15 to 20 Indian children per month. The State-Tribal arrangement also provides for interagency collaboration, staff training, information exchange, facility use, cultural training, access to the foster care review board, access to foster homes, and methods for accessing information.

Discussions about agreements or memoranda of understanding are underway with other tribes. In addition, several Districts have developed informal working relationships with tribes in their area. As reported earlier, at least one District is working to establish a more formal arrangement with a nearby Indian community. DES also has a contract with at least one tribe to provide parenting skill training.

Implementation by State Courts

When asked how the court determines if a child who does not live on a reservation is subject to the Indian Child Welfare Act, two of the three Arizona State court judges interviewed indicated that public child welfare agency staff make this determination and then inform the court. If a family that comes before the court has not been identified as Indian but appears by name, physical characteristics or other indicators to be Indian, one judge said the court "instructs the DES worker to follow the ICWA." The third judge stated that identity is determined through discussions with the parents, and then by contacting the tribe if there is any doubt.

All three judges take strong positions in insisting that parents be notified about an impending hearing. "[DES] has to file a proof of notice. If this is not present, there is no hearing." "We will not proceed until the parent is notified. The judge must be convinced that all attempts have been made." "[There is] written notification. If that doesn't work, parents will be notified by phone."

The State has made special training available to the judges whose courts hear ICWA-related cases. Special training was provided at the initiation of the Act and on-going training is provided by the State, either through DES or by the Attorney General's office. However, of the three State court judges we interviewed, only one had participated in any conferences or training programs related to implementation of the ICWA. This was a two-hour session held in 1986 at the Judicial College in Reno, Nevada. This same judge has done between six and eight weeks of caseworker training for DES.

State officials reported that several mechanisms are designed to assure that the courts in Arizona adhere to the provisions of the ICWA and State laws in the adjudication of custody for Indian children. The State Attorney General's office has identified one of the Attorneys General as a specialist in the implementation of the ICWA. The State Foster Care Review Board regularly reviews ICWA cases and makes recommendations to the courts that are involved. Special consultation and oversight is provided by the assigned Attorney General.

Minnesota

Among the four states in our field study, Minnesota is unique in being a "280 state," meaning that jurisdiction over Indian lands was assigned to the State in 1953 by Public Law 280. The Red Lake Reservation--one of the tribal sites in the field study--was excepted. Thus, public child welfare agency staff and State courts have the same authority to provide services and issue rulings on all Minnesota reservations except Red Lake that they do in all other parts of the State.

Minnesota operates a county-administered child welfare program through its Department of Human Services (DHS). Passage of the Federal Indian Child Welfare Act prompted a series of steps by DHS and other State officials to implement the law. Among these steps have been the development of policies and procedures, many of which are contained in the Social Services Manual used by the state and county DHS staff; identification of funding and other strategies to build tribal and public capacity to implement ICWA provisions; the hiring of a state agency Indian child welfare liaison; and the passage of a state Indian child welfare act to reinforce, clarify, and extend sections of the Federal ICWA. Each of these is discussed more fully in the following paragraphs.

State-level Implementation Efforts

The policies and procedures established by the DHS to implement the Act are largely contained in the Social Services Manual. Two procedures were specifically singled out: recruitment of Indian foster homes and procedures to assure that a child who is a state ward (and therefore under consideration for adoption) has all the rights and benefits of tribal membership. One respondent commented that "adoption procedures have been much stronger than those for foster care," in part because the cases of children who are state wards are supervised by state office staff, which includes four adoption workers but only one foster care worker. From the beginning, issues surrounding differences specified in the Act for voluntary as compared to involuntary placements have proved troublesome. The state Indian child welfare legislation specifically addresses some of these issues, as will be described shortly.

At the State level, DHS staff have worked with BIA staff to implement the Federal ICWA. Contacts occur most often in adoption cases, for example, when staff are trying to find an Indian parent or to determine the parent's enrollment or the child's eligibility for enrollment in the tribe.

As a result of the Federal ICWA, DHS added a new staff person at the State level in 1985. Qualifications for the position were tribal enrollment, if possible; experience in child welfare; and credibility in the Indian community. The individual hired is a member of a Sioux tribe who possesses an M.S.W. and has worked with the Indian Affairs Board. Responsibilities include managing the Title IV-B contracts with the tribes, monitoring implementation of the Minnesota Indian Family Preservation Act of 1985, designing a training module to train Indian staff, who in turn can train other family workers, and developing a training manual on the State and Federal Acts for county staff.

Local Agency Procedures and Training

Respondents at the county level identified the State plan and/or manual as the rule for their agencies' policies and procedures for the ICWA. In one agency, items on an intake form (for example, Indian ancestry/tribe) have been added to enable implementation of some provisions of the Act. At another agency, a respondent noted that "we typically would be following the same procedures for non-Indian children as for Indian children, except for notification." Staff at the third agency mentioned observing the procedures for notification to the tribe and the order of placement preference. In addition, they "have two culturally sensitive members of Indian tribes who are social workers."

Public child welfare administrators in the three counties said that 100 percent, "a very high percentage," and 75 percent of their staff, respectively, have received training on the Federal ICWA. Administrators in the first county indicated that the orientation for new employees covers the ICWA and staff get interpretations from judges and certain attorneys, as well as receive DHS materials, such as instructional bulletins and the procedural manual. In the second county, training has been provided by county DHS staff and the American Indian Center, which conducted a day-long session that included a presentation by a public juvenile court judge. In the third county, types and sources of training include:

- Tribal social services staff;
- Tribal judges;
- A second tribe's attorney, who went through the law;
- An ICWA specialist, who held a 2-day session on the Act; and
- Three Feathers Associates, which conducted a 3-day session in Denver described as "very helpful."

At the state level, one respondent summarized training needs in this way. "In the first few years after passage of the Federal ICWA, there were numerous workshops and conferences on the provisions, intent and legal implications of the Act for state, county, and tribal child welfare staff. Now we have mature, well-developed programs, but the need for retraining exists to assimilate developments and the new State Acts."

Monitoring Local Compliance

DHS has established several procedures to monitor compliance with the Federal ICWA, as well as the State MIFPA, by county child welfare agencies. Through the yearly Voluntary Cooperative Information System (VCIS), some data are available, especially for adoption cases. DHS is piloting a quarterly child-family reporting system that will include compliance information on substitute care and adoption cases. In addition, a monitoring group was formed to review by county the implementation of the Federal ICWA and the MIFPA. This review was to be completed during the summer of 1987. Staff at the State DHS examine the information from these three reporting systems to determine the extent to which the local public agencies are complying with the laws.

State Indian Child Welfare Act

Minnesota is one of two states among our four field study states that have passed their own laws pertaining to Indian child welfare. The Minnesota Indian Family Preservation Act, which became effective August 1, 1985, focuses on preplacement prevention services. The MIFPA was passed in part to introduce services and protections for the family at an earlier point in the family's experience with the child welfare system than the ICWA provides and also to clarify certain terminology found in the ICWA. The MIFPA:

- Uses the same definitions of terms as the Federal ICWA, and adds or expands definitions that are required, such as "voluntary placements."
- Provides access to county records by Indian social services.
- Reinforces notification for involuntary cases and provides notification within 7 days of:
  - the voluntary placement of an Indian child;
  - the determination that an Indian child's case could lead to a preadoptive or adoptive placement; and
  - the determination that an Indian child may be served by an agency for more than 30 days and is at risk of an out-of-home placement.
- Enables the parent who voluntarily places a child to have the child returned within 24 hours of the agency's receipt of the parent's demand.
- Reinforces full faith and credit to tribal courts.
- Affirms that the tribe has the right to determine membership in the tribe.

In the words of one State respondent, the State Act differs from the Federal Act in that "it requires much more involvement [on the part of] the counties and places greater responsibility on tribal social services. Also, [there is greater] responsibility on the counties to find Indian adoptive homes."

DHS child welfare respondents at the county level tend to see the MIFPA as an extension of or nearly identical to the Federal ICWA. Compliance with the MIFPA was viewed as fairly good. One respondent said that it is difficult to implement the provision defining the extended family member, because that definition is "much broader than what we normally think of and varies with other assistance programs. [Related to this issue is] eligibility for public assistance." This issue applies also to the Federal Act.

Tribal, off-reservation and BIA child welfare staff and tribal executives who were interviewed had few comments on the MIFPA. One respondent described the State Act as "covering some of the loopholes in the Federal Act." Another respondent observed: "Because it's a State law, the State judges have to comply with it. It's through the State law that judges become aware of the Federal Indian Child Welfare Act." [This comment should not be interpreted as suggesting that State judges do not have to comply with the Federal law.] One of the Red Lake Chippewa tribal officials indicated that an amendment should be passed "to include Red Lake as a sovereign nation within the State."

Tribal executives were asked to identify those aspects of the State law that are being implemented well. Notification was identified. With respect to parts of the State Act that are difficult to implement, one respondent said "juvenile justice cases" and expressed the opinion that the tribe should be notified in these types of cases.

A State-level respondent, when asked if any State law provisions that are different from the Federal ICWA provisions are difficult to implement, identified two issues: county agency attitudes toward decisions made by the tribal courts and who pays for certain services. In the example cited for the former issue, the county questioned the authority of a tribal court located outside the State not to follow the Interstate Compact Agreement and not to inform the county. As regards the latter issue, the MIFPA says that the county must pay for travel for a parent to visit his/her child. In cases where a child is in care on a reservation and the parent lives elsewhere, travel expenses can mount rapidly, which concerns county-level program administrators.

State-Tribal Agreements

The Minnesota State Legislature has shown "a lot of interest" in Indian child welfare issues, according to one State-level respondent. This judgment is based on the passage of the Minnesota Indian Family Preservation Act (MIFPA) and the amount of money allocated in support of the Act and, more recently, for direct grants ($1.5 million for a 2-year period beginning July 1987).

The identification and development of strategies to build tribal and public capacity to implement the ICWA provisions have been important. Cass County and the Leech Lake Band of the Minnesota Chippewa Tribe developed a contract to do joint work. This became a positive model for other communities. In 1982, the State began contracting a portion of State Title IV-B monies with tribes to build their capacity to implement the Federal law. This arrangement lasted for four years, until about September 1986, when these monies no longer were available. In addition, in Fiscal Year 1986 there was a large reduction in Title II funds for tribal child welfare programs in Minnesota, which resulted in attrition in tribal staff and cutbacks in tribal services. The combined loss of about $500,000 from the Title II and Title IV-B grants posed a serious problem. The McKnight Foundation provided a $250,000 grant in support of tribal child welfare programs, predicated on the State's examining the funding issue. In June 1987, the State Legislature passed legislation providing direct grants to Indian tribes and organizations for child welfare programs and services.

In Minnesota, there is a State-Tribal agreement between the State and the Minnesota Chippewa Tribe (MCT), a confederation of six Chippewa Bands residing on different reservations in the State. (The Red Lake Band of Chippewa Indians is not part of the confederation.) However, the agreement has not affected implementation of the Federal ICWA. According to the tribal judge who revealed the existence of the agreement, "It says that State public welfare will handle all MCT cases until consent is withdrawn by either party." It became effective January 1, 1980. It was passed right after the Federal Indian Child Welfare Act to correct the impression in some counties that public agencies no longer had to take responsibility for Indian children. In effect, the agreement formalizes the longstanding arrangement concerning child welfare service delivery to Indians.

A couple of years ago MCT and State representatives met to explore the development of a more substantive agreement. However, talks broke down after the Fond du Lac Band gave notice that the tribe was withdrawing consent for the State to handle all Indian child welfare cases, and the State Attorney General ruled against Fond du Lac. The Red Lake Chippewa have drafted an agreement, but at the time of the site visit it had not been approved by the Tribal Council. The state must wait for tribal approval before taking any action.

Minnesota does not have any Title IV-E contracts with Indian tribes in the state. Title IV-E provides funds to pay for foster care placements, and determination of a child's eligibility for IV-E support is made by the state juvenile court judge based on the public agency worker's recommendation.

Implementation by State Courts

Various procedures are followed by the three State courts included in our study to determine if a child who does not live on a reservation is an Indian child and therefore subject to the Federal ICWA. According to a judge in one county, the court itself does not do anything, because the county DHS agency checks out and provides the information to the court. In another court, the county attorney must indicate on the petition whether or not the child is Indian and make appropriate efforts, including notification when necessary, to obtain the information before filing the petition. When prior efforts have not shown whether the child is Indian or non-Indian, clues such as physical appearance or name are used. In the third court, the judge indicated that identifying the child as Indian usually is not difficult. Many families are involved periodically in court and are known. In addition, one parent usually is present at the hearing. Indian Legal Aid often sends a lawyer to the first hearing. Tribal social services staff, as well as DHS staff, are resources to help identify members of local or other tribes. If there ever is a doubt, the standard notice is sent.

All the judges reported that, when a child is found to be subject to the Act, the county attorney or the clerk of the court notifies the child's parents and tribe. This is required by State as well as Federal law. One judge simply stated: "We mail them a notice just like we do for everyone else. We don't treat them any differently than anyone else." A judge in another county also appoints attorneys for Indian parents if they are not already represented. The third judge said that, when parents first appear in court, he looks for the "certified letter in the file" showing that the parents and tribe received notification. This respondent commented that Minnesota law requries that the case be heard within 15 days after receipt of the notice, while the Federal law grants more time, which sometimes poses a dilemma.

The State court judges were asked if they have attended any conferences or training programs that dealt with implementation of the Federal ICWA. Two of the three judges interviewed have, while the third has not. Both of these judges have attended Supreme Court Continuing Education seminars, among others, and have given in-service training to tribal staff.

Oklahoma

Oklahoma has a State-administered child welfare system that is operated by the Oklahoma Department of Human Services (DHS). Hands-on service delivery takes place at county-level DHS offices. Efforts to implement the Indian Child Welfare Act have included hiring an ICW liaison at the State level, providing staff training and procedural manuals at both State and local levels, and contracting with tribes to provide foster care services. In addition, Oklahoma was the first State in the nation to pass a State Indian child welfare act as a mechanism for clarifying and implementing the Federal ICWA. These and other implementation efforts described by field study respondents are reviewed in the following pages.

State-level Implementation Efforts

Both the Federal Indian Child Welfare Act and Oklahoma's ICWA are interpreted through the State agency's Departmental Policy Manual that all local staff must read. However it took six years to produce the manual after the Federal ICWA was passed. In the interim, staff relied on periodic memoranda for instruction in implementation of the law. The State also has issued guidelines for determining if a child is covered by the ICWA as well as procedures for intake, termination of parental rights, and adoption. Other State-level efforts have included new coding for the computer system, extending NOVA University training for foster parent applicants to tribal applicants, and the development of legal documents.

An Indian Child Welfare Liaison was hired at the State level to guide the implementation of the Act, develop agreements, and monitor compliance of local public agencies with the ICWA and compliance of contracting tribes with P.L. 96-272 requirements. The State is required to ensure that the case practices of contracting tribes conform to the P.L. 96-272 requirements such as case plans and periodic reviews. Public officials expressed some concern about the tribes' compliance with these provisions.

Oklahoma has initiated several types of training on the ICWA for local staff. In the fall of 1986 the State office had just completed a "round of state-wide training of two days in each location with tribal staff telling us what we need to know (about Indian culture) one day and child welfare program staff presenting material from the manual the second day." It took a year to initiate training once the State manual was released.

Local Agency Procedures and Training

Local agencies reported that they were implementing the State departmental policies. Some agencies have held local conferences and workshops and they had developed their own manuals using materials from training sessions before the State manual was issued. They also addressed the law in their unit meetings, although one administrator said the Federal and State regulations "blur together."

Local staff confirmed that they had attended various conferences and workshops about State policies. Individual training by the local administrator occurred on individual cases. All three local public agency administrators interviewed said that all of their staff had received training on the ICWA. In one local agency this included training for monitoring the contracts with the tribes.

The local public child welfare agency noted that it is the court's responsibility to notify the tribe, although agency officials said they notify the tribe the next working day after they know they are dealing with an Indian child. Other practices include determination by the district attorney if a child is Indian or not, use of a set of notification forms to be sent to the relevant tribe and receipt of memos from the State agency dealing with ICWA legal opinions and procedures.

One local agency administrator stated that the lack of staff allows only partial implementation of the Indian Child Welfare Act's provisions in that county, although other officials stated that the Act's provisions are being implemented. Immediate contact with the tribe is difficult if protective service reports are received after normal working hours. Placement of children in Indian homes was considered difficult "because of the lack of relative and Indian foster homes" in a public agency where about half of the Indian foster children were said to be in Indian homes.

Monitoring Local Compliance

Monitoring of local practices is conducted by the State Indian child welfare liaison and his assistant through case reviews. In the fall of 1986 a monitoring system was being organized by the agency's monitoring unit to systematize this process.

State Indian Child Welfare Act

Oklahoma was the first state to pass its own Indian Child Welfare Act in response to the Federal ICWA. The law was passed in 1982 and serves to supplement and implement the Federal Act. The Oklahoma law covers such provisions contained in the Federal law as termination of parent rights, notification of family and tribe, parental rights, placement priorities and expert witnesses.

Most respondents commenting on the State law felt that it makes the Federal Act more explicit and has more impact on local agencies and judges because it is a State law. It authorizes the State agency to take some actions that are permissive in the Federal Act, such as entering into agreements with tribes. The State law provides funds to implement the Act and it also requires notification of the tribe even if foster care placement is voluntary. The law was viewed by some as a positive force even beyond child welfare in that it encourages State-tribal cooperation in several program areas. The early passage of the State law was considered indicative of the State legislature's degree of interest in Indian child welfare.

Public agency respondents generally were positive about the provisions of the State law except for a few that they find very difficult to implement. Primary among these is the requirement that the Federal ICWA order of preference for foster care placement is to be followed for a preadjudicatory placement (i.e., placement prior to the first court hearing). The documentation of active efforts to prevent placement also is considered difficult. Failure to comply with these provisions apparently has gone uncontested.

Tribal respondents also felt that the State law has reinforced the Federal act and made county workers willing to work with the tribes on all cases. According to one Indian official, the State law has had "a more direct effect in terms of awareness--it has given the child welfare people more clarity on who to call on and who's declared an Indian child."

Another positive aspect has been that "tribal workers want to have a positive program - we trust them and they trust us - this trust hasn't developed overnight - it has developed over the years," according to one public agency official.

State-Tribal Agreements

In Oklahoma, the State Indian Child Welfare Act governs general procedures regarding Indian child welfare, such as notification and placement priorities, that are covered by State-Tribal agreements in other states. State-Tribal agreements are developed in regard to foster care services. Contracts between the State and tribes provide for foster care services through Title IV-E, Title IV-B, and State funds. Twelve tribes have contracts with the State. Most have begun fairly recently. Contracts are open-ended, paying for foster care services provided by foster families. However, most contracts are for less than $25,000 a year, although those for the Cheyenne & Arapaho and the Comanche are higher than $25,000.

Implementation by State Courts

The four Oklahoma State court judges interviewed reported that they require notification of the tribe when an Indian child comes before their courts. If the tribe is unknown, at least one judge reported that he notifies the BIA. If parents do not appear, summonses are sent to them. Determination of the child's Indian heritage usually is dependent on the knowledge of the DHS worker or the child's parents.

One local agency official reported that the judge "pushed the affidavits on emergency removal and preventive measures to comply with the Act. He actively inquires and places an order if the ICWA applies."

Some training was offered to the judges including a two-day session offered by DHS in 1986, a two-day session by the Oklahoma Indian Legal Services in 1984, and the state judicial conference. Three of the interviewed judges said they had received some training.

The State DHS claimed responsibility for monitoring the judges through DHS district supervisors who meet with the judges routinely. They had provided courts with samples of affidavits that need to accompany children to court. They ask the courts to report back to DHS if there are problems.

South Dakota

As is true of Arizona and Oklahoma, South Dakota's child welfare system is State-administered. Child welfare is the responsibility of the Department of Social Services (DSS), which has offices in cities and towns across the state. The state is rather unique in that, even though it does not fall under the provisions of Public Law 280, some public child welfare offices are located within the boundaries of Indian reservations. This arrangement pre-dates the Indian Child Welfare Act. Also pre-dating the Act, according to State officials, is a policy of attempting to place Indian foster children with Indian families. Officials report that in some regards, public program efforts to implement the ICWA have involved formalizing child welfare procedures and State-tribe relationships that already existed.

State-level Implementation Efforts

The Department of Social Services has engaged in a number of activities in an effort to implement the Indian Child Welfare Act in South Dakota. The State Child Protection Services Procedures Manual, which applies to all children in the State, has been amended by the addition of two special sections. One addresses placement requirements for Indian children and the other outlines legal procedures. The Manual discusses tribal enrollment of Indian children, stating that, "Every eligible Indian child should be enrolled. ... Enrollment is the responsibility of the social worker if the child is in Department of Social Services custody" (page 26). The Legal Procedures appendix of the manual contains examples of forms to be used notifying parents and tribes of pending proceedings, notifying the BIA that a child's parents or tribe cannot be determined, documenting voluntary consent to termination of parental rights and transferring jurisdiction from the State to a tribal court.

In addition to amending its Manual, DSS put together an informational package for State's attorneys on P.L. 96-272 and the ICWA that outlines responsibilities and steps to be taken in dealing with cases involving Indian children.

The State agency consults with BIA offices on specific cases in an effort to implement the ICWA and has provided the South Dakota tribes with a model case plan for permanency planning. DSS has not added any new staff or positions in response to the ICWA. The Foster Care Program Specialist for the State agency develops policies and procedures for field staff including those that deal with the ICWA.

To facilitate efforts to follow the order of placement preference specified by the Act or by resolution of specific tribes, DSS developed an "ICWA Fact Sheet" that is to be included in the case record of all Indian children. The Fact Sheet is a form with space for data on the tribal affiliation and enrollment number of the child and parents, including the child's blood quantum. The form also provides space to list names and addresses of extended family members and other Indian resources, and to record the outcomes of contacts exploring their availability to serve as placements for the child.

Over the years the State Department of Social Services has set up a number of training sessions focused on the Act. These workshops have been for DSS staff and judges and other individuals from the State legal system, and have been open to tribal personnel. One session was conducted by an attorney from New York who had helped to draft the Act. Another session was given by the American Indian Law Center. At least two sessions were conducted in collaboration with the Office of Indian Affairs. Most of these have been 1-day programs. The dates of training were not specified, although a local administrator reported that there has been no training from the State since 1983.

Local Agency Procedures and Training

Local agency staff receive copies of the Procedures Manual discussed previously. Two of the local foster care administrators indicated that their staff does not receive formal training on the Act other than what is included in the manual or may be provided in the basic DSS orientation. In these agencies, training is conducted on a case-by-case basis by staff supervisors.

The third local administrator said that all staff there except one had received training on the Federal ICWA. The types of training provided include sessions by a local attorney with tribal affiliations and adoption training by the South Dakota District Adoption Specialists. In addition, an Indian staff member who has been involved in ICWA since its inception has conducted some training for the staff and serves as a staff resource for answering questions on the Act.

Monitoring Local Compliance

As a way of monitoring local compliance with the Act, an individual from the State DSS office conducts a site review of all local offices every 18 months. At this time a check is made to determine that the Fact Sheet described earlier is completed for each Indian child. Supervisors in each local office also are responsible for reviewing cases concerning Indian children to determine that the Fact Sheet is complete and to assure that the local agency is in compliance with the ICWA. In addition, information on each child in substitute care is entered into the statewide Social Service Information System. Each month, a State official receives a report from the system on Indian children in care.

State-Tribal Agreements

In South Dakota, the only formal State-Tribal Agreement that exists is with the Sisseton-Wahpeton Sioux Tribe. The State of South Dakota has contracted with the tribe to operate the full range of child welfare services including prevention and substitute care placement. Cases involving children who come under the ICWA are transferred to tribal jurisdiction automatically. As part of this larger contract, the tribe has direct access to Title IV-E funds to pay for placements of eligible children. The amount of IV-E monies is negotiated by the State and the tribe on an annual basis. The Department of Social Services monitors this contract through annual site reviews. At this time, DSS reviews tribal case records in the same way that it reviews records of local DSS agencies.

Of all children (not just Indians) in substitute care in South Dakota, about half are IV-E eligible. Placements for many Indian children in addition to those belonging to the Sisseton-Wahpeton Tribe are financed through IV-E funds. The tribal court has jurisdiction over whether or not Indian children will be placed in foster care, except in emergency situations when tribal and/or BIA law-enforcement officials may make the decision. However, the DSS Office of Economic Assistance determines the child's IV-E eligibility.

South Dakota does not have formal agreements regarding Indian child welfare with any other tribes. Attempts have been made to develop such agreements, however. DSS developed a draft agreement that was offered to all tribes except the Standing Rock Sioux, who provide their own comprehensive services.

The draft agreement incorporates the Federal ICWA and covers a number of other areas that deal with the care and custody of Indian children. It addresses jurisdiction issues and placement services. It gives to the tribe responsibility for providing child protection standards and services for children on the reservation. It acknowledges the authority of the tribe to license foster care facilities and does away with the need for licensing of facilities by both the tribe and the Department. Additionally, the agreement affirms the tribe's authority to place for adoption children who are members of the tribe. The final section of the agreement deals with interstate placement of children and says that the tribe may seek the assistance of the Department in such activities.

Thus far DSS has received no response to the proposed agreement. One State-level respondent thought that such agreements are not a priority for the tribes at the present time. A representative of one tribe indicated that the tribe is "leary" of entering into such an agreement with the State. A tribal child welfare administrator said that the tribe has tried to negotiate an agreement with the State but it has been difficult. The tribe would like to provide protective services and eliminate dual (State and tribe) foster home licensing. Although the ICWA indicates that the State may place a child in a tribally approved home, the State does not use homes unless they have been licensed either by the State or by the Sisseton-Wahpeton Tribe. As mentioned above, elimination of dual licensing is part of the DSS draft tribal agreement.

Implementation by State Courts

In attempting to implement the Indian Child Welfare Act, the State court judge interviewed in South Dakota said that he does a number of things. For example, to determine if there are possible tribal affiliations for a child not living on a reservation who is scheduled for custody proceedings, he will inquire of DSS, the caseworker, or the State's attorney. In most cases, he is told by the party bringing the action (DSS or the State's attorney), but if necessary he asks in court.

In terms of the ICWA requirement that the parents and tribe be notified if a child is found to be subject to the Act, the judge indicated that he requires that DSS or the State's attorney notify the tribe in writing. A copy of this notice goes into the court file and the judge checks the file for it. The appearance of parents at the hearing provides assurance that the parents have been notified.

A local foster care administrator said that the State court tries to respond to the requirements of ICWA. The administrator indicated that the State's attorney in that jurisdiction has been open to education on the subject and has gone to a reservation to observe and meet with tribal judges. One judge, in particular, has become quite familiar with the Act and "bends over backwards to be sure we're in compliance."

The State court judge we interviewed said that he had not attended any conferences or training programs that dealt with implementation of the ICWA. However, as discussed in the previous section, the DSS has offered a number of day-long workshops focusing on the Act designed for agency staff and the legal system. Apparently some judges from the State court system have participated in these workshops.

A State-level respondent reported that adherence to the Act by the State courts is monitored by DSS staff. They are involved continuously in checking with the State's Attorney to see if requirements of the Act are adhered to.

2. How do the parties to State-Tribal agreements or contracts view these arrangements?

As reported in the preceding discussion, at least one State-Tribal agreement of some type exists in each of the four field study states. In three of the four, the agreements include purchase-of-service arrangements that give tribal programs direct access to Title IV-E monies. In the fourth state, there is an agreement between the State and a tribal confederation giving the State consent to handle child welfare cases involving members of the confederated tribes.

State-level officials in the three states with agreements that incorporate IV-E funds were asked to identify ways that the agreements have helped in implementation of the Indian Child Welfare Act and what difficulties have been encountered in implementing them. These officials generally view the various agreements positively. Specific comments focused on the improved coordination and trust between tribal officials and State staff and the developments of more resources for children. Where the agreements cover placing children, it is "easier to make placements [and to make] better placements."

Difficulties in developing and instituting comprehensive agreements emerge in part because "the total system [is] involved, that is, judicial, law enforcement, and social services." In one state, the service agreement "defines the roles and responsibilities of all the actors" and a staff person was dedicated to that effort. The BIA had disagreed with some provisions of one agreement and meetings were held among high-level staff to work out the differences. One official reported that one of the tribes with which the State is discussing an agreement wants the agreement to be with the State government, rather than with the State child welfare agency, which makes the "negotiations more difficult."

State-level officials report that some problems have occurred in implementating agreements that include Title IV-E payments for foster care maintenance. In some instances, there has been difficulty with the tribes applying IV-E eligibility requirements and keeping proper records. Technical assistance from State staff has been brought to bear on these problems.

Among the tribes visited for this study, four are parties to State-Tribal agreements involving IV-E funds. Executives, child welfare administrators, and tribal court judges of those tribes provided assessments of and comments on those agreements. Tribal executives were either "very satisfied" or "somewhat satisfied" with their agreements. Of the two persons who made the latter rating, one said "some specifics are [being worked] out; [then] everyone should be completely satisfied," while the other indicated that a new system being initiated to get IV-E reimbursements "will eliminate late payments to foster care providers." Another respondent explained why he was very satisfied with the agreement in the following terms.

> The State respects the sovereignty of [the tribe and] follows the Indian Child Welfare guidelines. [We] have a real good working relationship with the State. [There are] some needs in the community which the tribe can't meet, so the agreement is the vehicle for the State and tribe to work together to meet those needs. For instance, the State pays for foster care, but the children are in Indian foster homes on the reservation and the cases are managed by the tribal program.

No problems were identified with the State-Tribal agreements by the respondents in two of the three States. In the third state, the IV-E contracts have "improved relationships" in some instances, but nonetheless have also presented some difficulties. Just getting the foster care system implemented needed a great deal of effort, and there was "limited training and technical assistance by the State on requirements of court orders and case plans." Because of the "small staff and limited funds, [there has been] some trouble in documentation of records." Delays in initiating foster care payments also have occurred. This apparently refers to the "time lapse [between] getting children into the system and then getting foster parents paid." Finally, payment for relative foster care--one of the preferred placements under the ICWA--was not covered originally, but some tribal contracts now provide for such payments. If any changes could be made in the IV-E contracts, it would be to receive funds directly from the Federal government and to include adoption subsidies, according to the two tribal executives who responded to this question.

3. How do tribal, Bureau of Indian Affairs and off-reservation Indian center officials characterize their interactions with State courts?

At the Indian- and BIA-operated programs we visited, officials were asked about the relationship and nature of their program's involvement with State juvenile courts. Tribal executives described the relationship and interactions between state and tribal courts in generally favorable terms. While one respondent indicated that there has been "very little interaction recently [because] we haven't had any cases," elsewhere "positive" or "pretty good" relationships exist. One tribal executive commented that relationships "are working well. We still need to improve communications and expose state court officials to Indian culture." Another executive in the same state observed, "We have gone a long way. Notification has improved. We don't have to fight for kids. Petitioning the [State] court has decreased."

Administrators of four off-reservation Indian-operated programs and three of the five BIA programs visited have some involvement with State juvenile courts. For BIA administrators, their experience with the courts may involve doing a home study on the reservation, providing testimony in jurisdiction cases, determining if residency is on "restricted [i.e., Indian] land" and, especially when that status has not been determined for an Indian family, accompanying public agency workers on investigations and home visits. Two points of dissatisfaction regarding interactions with State courts were expressed. One involved county probation officers, who are officers of the court, "picking up kids, taking them to the reservation, and dumping them." The other area of contention identified is that State courts "adjudicate and place the child and expect the BIA agency to pay."

Administrators of off-reservation Indian center child and family programs report that they work with State courts as advocates, legal representatives (i.e. attorneys or guardians *ad litem*), or expert witnesses for Indian families. In some instances, State courts may subpoena program records. One administrator is primarily "involved in adjudication hearings involving children in foster homes." Another tried unsuccessfully to provide information reflecting Indian Child Welfare Act procedures for a new juvenile court rules publication. This respondent said, "so much depends on the judge" and then described how seriously one judge enforced the Act, in contrast to another judge who is "not as sensitive."

4. **When an Indian child is involved in custody proceedings in a State court, do public child welfare agencies notify the child's parents and tribe of the pending proceedings?**

The Indian Child Welfare Act requires that, when an Indian child is involved in a custody proceeding in a State court, the party bringing the action--usually a public child welfare program--must notify the child's parent or Indian custodian and the child's tribe of the upcoming proceedings. Notification is to be made by registered mail with return receipt requested. The parent or tribe then may petition to have the case transferred to tribal jurisdiction or may intervene in the State court proceedings.

Adherence to the notification requirement involves a number of steps, each with attendant problems. Inadequate support for or attention to any of those steps lessens the likelihood that proper notification is made. The first issue that must be addressed is whether or not the Indian Child Welfare applies to a particular child. If is does, the actual notification process may encounter problems. Discussions of these two topics are presented here, followed by data on notifications ontained from case records reviewed for the field study.

Issues in Determining Applicability of ICWA

The first step in notifying parents and tribes, and the first place problems arise, is "identifying that clients are Indian." Although many Indian parents--and some children--have become aware of their rights under the ICWA and make sure to inform social services staff of their Indian background, child welfare staff must make this determination if clients do not offer the information. In some states, such as those with small Indian populations and those in which efforts to implement the ICWA have been limited or absent, it seems likely that caseworkers do not raise the issue with clients. In other places they apparently inquire only if a client's physical appearance, surname, address or other characteristic suggests Native American heritage. The large numbers of blue-eyed, Anglo or Hispanic-surnamed, or urban-dwelling Indians make this an incomplete--not to mention stereotype-based--strategy.

An additional problem related to the identification of Indian background is that some individuals, for example, those who are of both Indian and non-Indian descent, "may want to be treated as non-Indian." They therefore might choose not to acknowledge Indian heritage even if asked. While parent objection precludes transfer of a case to tribal jurisdiction, a parent's choosing not to be identified as Indian means that the tribe remains unaware that one of its children has become involved in custody proceedings.

Once it is determined that the child welfare client is of Indian descent, the next step toward notification is identifying the tribe(s) in the child's background. Again, this step is not problematic if the parent provides the information. If the parent is unsure or is not available, there can be a number of difficulties. For example, some tribes identify themselves by their traditional names but are known to the larger public by more recently ascribed names (e.g., the Tohono O'odham commonly are called "Papago") or by the names of their reservations (e.g., references are to "Pine Ridge", which is the reservation of the Oglala Sioux Tribe, or to "Rocky Boy's," the reservation of the Chippewa-Cree Indians). Thus, the tribe name given by a parent or relative may not be recognized by a social worker who knows that tribe by a different designation. As one field study respondent reported, "Public agency staff are not familiar with the tribes, especially those located outside the state."

Another problem in determining tribal affiliation arises from the existence of multiple bands of the same historic tribe. There are, for example, 8 different Federally recognized bands of Apache, 15 bands of Sioux, 18 bands of Chippewa and 21 bands of Paiute, each governed separately, each with its own enrollment requirements and rolls. If a relative says the child "may be Sioux," for instance, the child welfare agency still lacks definitive information on the child's tribal affiliation.

After the question of tribal background is addressed, the third step is to determine if the child either is enrolled in the identified tribe(s) or is eligible for enrollment and is the biological child of an enrolled tribe member. Each tribe establishes its own criteria for enrollment, and different tribes have different criteria. Some tribes permit dual enrollment while others do not.

A fundamental issue in enrollment eligibility is "blood quantum," which is the proportion of one's ancestry that is Indian. Two issues related to blood quantum complicate the determination of enrollment eligibility. The first is that, while a majority of tribes require at least one-quarter blood quantum (e.g., one of four grandparents was a full-blooded Indian or two grandparents were each one-half Indian), the remaining tribes have different blood quantum requirements. The second blood quantum issue is that for many tribes the blood quantum requirement refers to ancestry from *that tribe*, while other tribes consider ancestry from *any* tribe in determining blood quantum. Thus, for example, a child with eight full-blooded Indian great-grandparents from eight different tribes might be eligible for enrollment in none of those tribes, in all eight tribes, or in any combination thereof, depending on the standards of the particular eight tribes.

Issues in Making Notification

Once the question of child enrollment or child eligibility and parent enrollment is resolved, the child welfare program knows whether or not ICWA procedures are to be followed. If they are, the next step in the notification process is determining where the the notifications to parents and tribe(s) should be sent. The agency may or may not have the address of the Indian parent(s). This can be more problematic if there is a non-custodial parent who is Indian and the custodial parent does not know or wish to divulge an address.

Discovering where to send a tribal notification also can be difficult. Notice is to be sent to the tribal chairman unless the tribe designates another agent. The Department of the Interior is to publish a list of designated agents annually in the Federal Register. Potential problems in using this listing are illustrated by the manual on *Implementation of the Indian Child Welfare Act of 1978* (April 1986 Revision) prepared by the Office of the

Attorney General in South Dakota. In a section on "Procedure for giving Notice," the manual lists the designated agents (name of person or name of office, address, phone number) given for the nine South Dakota tribes in the most recent Federal Register announcement. It reports that one of the listed phone numbers had been disconnected, two of the designated agents were known to have left office, and a third might have done so. It cautions against sending a notice to the designated agent at four tribes unless it has been verified that the person still holds that office and, if verification is not obtained, it recommends that a duplicate notice be sent to the tribal chairman. It also states that, while the Federal Register listing includes an "either/or" choice for one tribe, the tribal court has a definite preference concerning which agent is to be contacted. In total, the Office of the Attorney General believed that alternate or contingency instructions for notification were needed for eight of the nine tribes in the state.

It should be noted that the Bureau of Indian Affairs is charged with assisting in the location and notification of parents and tribes. We have no information on how frequently the BIA receives requests for such assistance, nor on the disposition of these requests. One respondent at a BIA agency field site reported that the agency sometimes receives notifications intended for a tribe in the area and that it passes these on to the tribe.

In addition to the problems just discussed, two other issues related to implementation of the ICWA's notification requirement were identified during interviews with public program officials. One is the need for "recognition that formal notification to parents and the tribe is a requirement that must be observed at each step." The other issue involves interpretation of the notification provision in cases where voluntary termination of parental rights (TPR) occurs. One respondent described it as the "clarity or unclarity of the requirement to notify the tribe in a voluntary TPR when the Indian parent says she or he doesn't want the tribe to be notified."

Tribal respondents also discussed implementation of the notification requirement. While several officials reported improvements over time as individual states have become more familiar with the tribes and their organization, they indicated that some public programs and State courts still do not comply with this requirement of the Act. Three tribal child welfare program administrators--one each in Arizona, Minnesota and Oklahoma--said they knew of two, one and five cases, respectively, in the preceding two years in which their tribe should have been notified about a child involved in a State court proceeding but was not. At least two of these children were in the custody of a State other than the one in which the tribe's reservation is located.

The timeliness of the notification to the tribe and tribal court also is a problem. In one example cited, the public agency had all the necessary information, but six weeks after the child had been placed, the tribe still had not been notified.

Several tribal officials discussed the issue of tribal notification in voluntary cases. While believing that a parent's desire for "anonymity is always of concern" in child custody proceedings, and especially those involving termination of parental rights, some officials hold the view that tribes are to be notified in voluntary as well as involuntary cases and that some State courts do not comply. "Voluntary relinquishment of parental rights is being used by some State courts as cause not to notify the tribe." "Some courts use [the fact that a placement is voluntary] to shut out the tribes--a reason for not notifying the tribes." If parents do not want the tribe to be notified, public agency workers may concur, but "the Act should apply" to these situations.

Case Record Data on Notification

As part of our visits to 12 local public child welfare programs, we reviewed 173 child welfare case records of Native American children in substitute care. Of these cases, 126 (73 percent) were under the jurisdiction of the State, 42 (24 percent) were under jurisdiction of a tribe, and 2 (1 percent) were under concurrent, or joint, jurisdiction. For three cases (2 percent), jurisdiction could not be determined from the case record. The number of cases reviewed at each site and the jurisdiction of those cases are shown in Table 5-1.

The 126 case records of Native American children in public substitute care under State jurisdiction were examined for evidence that the children's parents or Indian custodians had been notified of the initial custody proceedings. These records suggest that parents and tribes are not consistently receiving the required notification. Of the 126 records, 60 percent contained a copy of a notice to the parents of early custody proceedings and another 5 percent contained a notation that notice had been sent. In 21 percent of the cases (N=27), there was no indication that the parents were notified, although in 4 of the 27 cases the parent(s) attended the custody hearing. It is possible that notifications were in fact sent in some of these cases, but no documentation of the notice was made in the case record. For 14 percent of cases, the status of notification could not be determined.

Site-by-site data on notification of parents are displayed in Table 5-2. The percentage of case records containing copies of notices to parents ranges from 25 to 92 percent. The percentage of cases in which parents apparently received no notice, including cases in which parents were present for the custody proceedings, ranges from 8 to 50 percent.

With respect to notification of the child's tribe, 41 percent of the 126 case records contained copies of notifications to tribes and another 14 percent contained notations that the tribes had been notified. In 17 percent of the cases, the case records gave no indication that notification had been made but it appeared that the tribe was aware of the case: a tribal representative appeared at the hearing, for example, or the file contained a copy of correspondence from the tribe concerning the case. The tribe was aware of 7 percent of the cases from their inception, making notification unnecessary. Based on case records, it appears that tribes were not notified of and did not know about 20 percent of the 126 cases. Again, incomplete case documentation may be inflating this figure. Notification status could not be determined from 2 percent of the case records.

Table 5-1

Jurisdiction over Native American Children in Substitute Care in Public Child Welfare Programs

Jurisdiction	Arizona Program A (N=19)	Arizona Program B (N=22)	Arizona Program C (N=11)	Minnesota Program A (N=12)	Minnesota Program B (N=12)	Minnesota Program C (N=12)	Oklahoma Program A (N=16)	Oklahoma Program B (N=11)	Oklahoma Program C (N=13)	South Dakota Program A (N=14)	South Dakota Program B (N=18)	South Dakota Program C (N=13)
	%	%	%	%	%	%	%	%	%	%	%	%
State	100.0	100.0	100.0	16.7	100.0	100.0	81.3	90.1	100.0	0	0	92.3
Tribe	0	0	0	75.0	0	0	0	0	0	100.0	100.0	7.7
Joint State and Tribe	0	0	0	8.3	0	0	6.3	0	0	0	0	0
Unable to Determine	0	0	0	0	0	0	12.5	9.1	0	0	0	0

Table 5-2

Notification of Indian Parents for Native American Children Under State Jurisdiction in Public Child Welfare Programs

Parent Notification	Arizona Program A (N=19)	Arizona Program B (N=22)	Arizona Program C (N=11)	Minnesota Program A (N= 2)	Minnesota Program B (N=12)	Minnesota Program C (N=12)	Oklahoma Program A (N=13)	Oklahoma Program B (N=10)	Oklahoma Program C (N=13)	South Dakota Program A (N= 0)	South Dakota Program B (N= 0)	South Dakota Program C (N=12)
	%	%	%	%	%	%	%	%	%			%
Copy of notice to parent(s) in case record.	63.2	54.5	63.6	50.0	50.0	25.0	61.5	60.0	69.2			91.7
Case record says parent(s) notified. No copy of notice in file.	21.1	0	9.1	0	0	8.3	0	0	0			0
Case record does not report notification but parent(s) attended custody hearing.	0	4.5	0	0	16.7	8.3	0	0	0	All children under tribal jurisdiction.		0
Parent(s) apparently not notified.	10.5	18.2	0	50.0	33.3	41.7	15.4	40.0	7.7			0
Unable to determine.	5.3	22.7	27.3	0	0	16.7	23.1	0	23.1			8.3

The findings for each site are reported in Table 5-3. As the table shows, these data vary considerably from site to site. The percentage of case records containing copies of notices ranges from 8 to 80 percent and the percentage of cases in which tribes apparently were not notified ranges from 5 to 67 percent.

5. What issues arise with respect to the transfer of custody proceedings involving Indian children from State to tribal jurisdiction? How frequently do State courts fail to transfer jurisdiction when requested and for what reasons?

The Indian Child Welfare Act instructs that, when an Indian child who lives off of the reservation becomes involved in custody proceedings in a State court, the court shall transfer those proceedings to tribal jurisdiction upon the request of the tribe or parent unless a parent objects, the tribe declines the transfer, or the court finds "good cause" not to transfer.

The _Guidelines for State Courts: Indian Child Custody Proceedings_, published in the Federal Register (Volume 44, Number 228) by the Bureau of Indian Affairs on November 26, 1979, identify five circumstances under which good cause not to transfer may exist. Two of these are that "the Indian child's tribe does not have a tribal court ... to which the case can be transferred" or that "the proceeding was at an advanced stage when the petition to transfer was received and the petitioner did not file the petition promptly after receiving notice of the hearing." The _Guidelines_ also state that, "Socio-economic conditions and the perceived adequacy of tribal or Bureau of Indian Affairs social services or judicial systems may not be considered in a determination that good cause exists" (page 67591).

The next several paragraphs relate issues involved in jurisdiction transfer that were identified by field study respondents. Following that are respondents' reports on the frequency with which requests for transfer are denied and the reasons for denial. Case record data on transfer or denial of transfer are presented last.

Issues in Transfer of Jurisdiction

From interviews with field study respondents, two primary issues emerged regarding transfer of jurisdiction. The first is a pattern in some states and State court jurisdictions of transferring cases to tribes automatically, whether or not the tribe requests the transfer and can provide needed services for the child. The second issue is the reverse of the first: State courts failing to transfer jurisdiction when the tribe petitions for transfer. These two issues are discussed at greater length following the next two paragraphs.

A third issue, raised by public program respondents in two states, is that tribes sometimes do not respond to the notifications that are sent. Sometimes, "it may take months for a tribe to respond." This can affect the timing of child custody proceedings and placement decisions. It appears that most courts in the study sites interpret lack of response to mean that the tribe is not interested in assuming jurisdiction.

Table 5-3

Notification of Tribes for Native American Children Under State Jurisdiction in Public Child Welfare Programs

	Arizona			Minnesota			Oklahoma			South Dakota		
Tribe Notification	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N= 2)	Program B (N=12)	Program C (N=12)	Program A (N=13)	Program B (N=10)	Program C (N=13)	Program A (N= 0)	Program B (N= 0)	Program C (N=12)
	%	%	%	%	%	%	%	%	%			%
Copy of notice to tribe in case record.	63.2	50.0	9.1	0	8.3	16.7	23.1	80.0	46.2	All children under tribal jurisdiction.		58.3
Case record says tribe was notified. No copy of notice in file.	15.8	18.2	18.2	50.0	8.3	8.3	15.4	20.0	0			8.3
Case record does not report notification but tribe apparently knew of case.	15.8	9.1	36.4	0	8.3	0	30.8	0	30.8			25.0
Notification not necessary. Tribe was aware of case from beginning.	0	0	0	0	66.7	0	0	0	0			0
Tribe apparently was not notified.	5.3	18.2	18.2	50.0	8.3	66.7	30.8	0	23.1			8.3
Unable to determine.	0	4.5	18.2	0	0	8.3	0	0	0			0

A fourth issue, identified by a public child welfare program administrator, is that tribal courts may assume jurisdiction and then expect the State to pay for the placement, or a tribal court may order services that the State or local public agency must pay for. While this situation apparently raises problems in some localities, in others it does not. In South Dakota, for example, where public programs are located on some reservations, tribes have jurisdiction over all children there and the State program provides services under tribal court direction.

The sense that State courts are passing "responsibility for all Indian children to the tribal [child welfare] agency" was expressed by several tribal and BIA respondents. Local agencies, named and unnamed by various officials, transfer cases "when it saves them money" or to "get rid of Indian children." Two BIA respondents severely criticized two western states not visited in this study for their practice of "dumping kids" or "unloading cases to escape financial responsibility." An average of two to three children per week are referred to one BIA program, sometimes without appropriate "screening of tribal bloodlines." Out-of-state transfers are increasing in the other BIA program. A third BIA respondent desscribed the return of children to the reservation "as a means for reducing State caseloads," and added that the State is doing this "even if parents continue to live off the reservation." Another BIA official reported that, "it seems that the State is somewhat anxious to return kids to the tribe. The tribe is getting more aware of assessing cases before accepting jurisdiction."

The comments of a State court judge suggest that, at least in that area, there is a policy of transferring all cases involving Indian children to tribes, and that the reason for the policy is to shift financial responsibility for child welfare services away from the State. "Because of troubled funding we are anxious to transfer all jurisdiction.... We don't make adjudications of Indian children. We transfer jurisdiction in all cases."

The second issue is the unwillingness of some public programs and State courts to transfer child custody proceedings to tribes. Tribal and BIA respondents in three states discussed this point. A BIA administrator commented, "The State will intervene and attempt to stop transfers back to the tribes in disregard of the parents' wishes." Two tribal officials described "battles to get children back to the tribe." One of these respondents said: "[The public agency] seems to feel that Indian people can't parent children [and that the tribe cannot be] trusted to make ... decisions." Examples cited included these.

- o A mother voluntarily relinquished rights to an infant child. The father sought custody through the tribe. The public agency required a home study and did not approve the father because he was on probation and unemployed. The tribe sent its own lawyer and the case finally was transferred.

- o A tribe requested transfer of a sibling group. The public agency blocked transfer and placed the children in foster homes, where two of the children were physically abused.

- A public program social worker felt a reservation was a poor place to raise children and blocked transfer of a case to the tribe.

- The tribe had a relative placement for four siblings, but a public agency in another state would not transfer the children to the tribe. The agency put the children into separate homes in four different states. Later, two of the children were sexually abused (and irretrievably damaged by the experience) and at least one was physically abused. "None of it need have happened."

Corroborating the comments of tribal and BIA respondents, some local public child welfare program administrators and State court judges expressed reservations about transferring children to tribal jurisdiction and tribal programs. Many of the difficulties identified relate to the lack of tribal services and resources that was mentioned by State and local public respondents in every state. For some transferred cases, tribes do not have the services that public agency staff believe are needed by the child and/or family. "Some judges felt skittish about putting a deprived child in the hands of Indians that had no court system or child welfare program." "I am concerned about the quality of care."

Frequency of and Reasons for Denial of Transfer

To get a sense for how frequently State courts do not transfer cases when a tribe or a parent has requested the transfer, we asked respondents of how many instances of this they were aware. We also looked for information on requested and denied transfer in the public and tribal program case records that we reviewed. Findings on this topic are described in the following paragraphs.

Three of the four State-level officials responsible for monitoring implementation of the Indian Child Welfare Act were not aware of any cases in which their State courts had refused to transfer jurisdiction to a tribe when requested. The fourth official knew of only "one or two cases not transferred for good cause."

One local public agency administrator in Arizona and two in Oklahoma knew of one, three, and "four or five in the past year" cases, respectively, in which the State court had found "good cause" not to transfer jurisdicton. One of these administrators did not know the court's reasons for refusing transfer. A second reported that the court's "good cause" finding in one case had been that the child always had lived in an Anglo home and so the Indian Child Welfare Act did not apply. This ruling later was overturned in appellate court. The third administrator reported that causes had included concern that the tribe intended to return the child to the mother who had allowed the abuse; and that the tribe had no placements. In the same jurisdiction, in a situation in which the tribe had not participated in a case involving two children and then later requested jurisdiction, the court at first refused to transfer jurisdiction but later consented, at which time the tribe waived jurisdiction over one of the children.

Three of the eleven State court judges--two in Minnesota and one in Oklahoma--had found cause not to transfer jurisdiction upon request in one case each. Reasons given were:

- In a neglect case that came to the point of terminating parental rights, after the public program had been working with the tribe on the case for a year, the tribe decided it wanted jurisdiction "but it was way too late" and the judge refused to transfer.
- "The woman had a prison population always hanging around. She had not given truthful information to the court. It also turned out there was no tribal court."
- The tribe was notified of the case in 1982. In 1984 the case went to termination of parental rights and then the tribe wanted jurisdiction. "The child's attorney did not want the case transferred to the tribe. The Indian Child Welfare Act does not allow the child's opinion to be considered [in matters of transfer], and the State court judge felt this deprived the child of a right to choice that State law grants." The tribal lawyer decided to yield.

Of the eleven tribal court and Court of Indian Offenses judges, four in three states had had transfers denied when their respective tribes petitioned for jurisdiction. The number of such cases identified was one each for two tribal judges and three and four for the other two. The State courts declining the transfers were located in California, Colorado, Indiana, Kentucky, Minnesota, Nebraska, North Dakota and Texas. No state was named by more than one judge, and in none of these instances was the State court located in the same state as the petitioning tribe. Reasons for not transferring jurisdiction identified by the tribal judges were:

- "The tribe lacked funds to return the child to the reservation."
- "[Courts in that state] were unfamiliar with the Indian Child Welfare Act and Indian children."
- "The [State] court claimed the reservation home unfit."
- There was "an informal adoption recognized by the State."
- "The mother was incarcerated, later released on probation. The child was held by the State until [the mother's] release."

Three of the tribal court judges interviewed identified other problems encountered by their tribes in having cases transferred. "[We have had] some difficulty in transferring cases from out of state." "A judge in [State] was unaware of the ICWA." "[State] claimed [the tribe was using] unlicensed foster homes." Two others indicated that there had been problems earlier but the situation has improved over time. "It's working well now." "Through education many problems have been resolved, but problems did exist with racism and not giving Indian courts credit for being valid."

One respondent at a BIA social services program, while not knowing the number of children for whom State judges had refused to transfer jurisdiction, reported that reasons for not transferring included perceived inadequacy of tribal resources, belief that the child did not identify with Indian culture, and a finding that the child's bloodline did not trace to that particular tribe.

An official at an off-reservation Indian center related the case of two children of the same mother with different fathers from different tribes, both of which declined jurisdiction when the children initially were taken into care. After 18 months, the public agency began proceedings to terminate parental rights, at which time each tribe requested jurisdiction over the child in its bloodline. The State court judge "wanted permanenecy for the children" and refused to transfer.

Case Record Data on Transfer of Jurisdiction

Case records of children in public and tribal substitute care reviewed for this study provide some additional information concerning the issue of jurisdictional transfer. Of 173 public program case records reviewed, 126 were for children under State jurisdiction. The children's tribes had petitioned for jurisdiction in 23 of these cases, or 18 percent. Of the 23 cases, parent objections precluded transfer in 5, while 11 eventually were transferred and 2 more were in the process of being transferred at the time the records were examined. Reasons for denying the transfer request in the remaining five cases included lack of a tribal representative at a hearing in 1 case, and a ruling by a State supreme court that the Indian Child Welfare Act did not apply in 1 case.

Among the 121 case records reviewed at tribal child welfare programs, 100 were for children under tribal jurisdiction. Of these, 46 had begun this substitute care episode under State jurisdiction and had been transferred upon the request of the tribe. Nineteen children in tribal care were under State jurisdiction. A tribe had wanted jurisdiction in one of these cases, but the case was not transferred because the parent objected. (Jurisdiction could not be determined in the other two cases.)

6. How often do States and tribes arrange concurrent jurisdiction? How frequently do cases involve interstate placements under the Interstate Compact on the Placement of Children?

Only in South Dakota did State-level officials report having a few Indian child welfare cases under concurrent, or joint, State-Tribe jurisdiction. One local public administrator in Arizona had had a case in which there was concurrent jurisdiction. This was arranged because some members of the involved family were living on the reservation and others were living elsewhere.

Among the cases reviewed, concurrent jurisdiction was [illegible]e. Only 2 of the 173 cases being served by public programs--1 in Minnesota and 1 in

Oklahoma--and none of the 121 cases reviewed at tribal programs were under concurrent jurisdiction.

The Interstate Compact on the Placement of Children (ICPC) is a uniform law, enacted by 49 States and the Virgin Islands, that governs situations in which a child under the jurisdiction of one State is placed in a substitute care or preadoptive setting that is overseen by State child welfare authorities in another State. The ICPC establishes procedures for an interstate placement and fixes responsibilities of the "sending" and "receiving" States.

Under the ICPC, the sending State has the same legal and financial responsibility for the child that it has for children placed within its own borders. Thus, while the child welfare system of the receiving State provides services such as home studies and courtesy supervision, the sending State retains supervisory authority and determines when and under what circumstances the placement is terminated. If the placement disrupts, the sending State is responsible for bringing the child home.

A State that has jurisdiction over an Indian child can arrange for the interstate placement of that child under the ICPC. Tribal governments, however, are not eligible to be parties to the ICPC. Thus, they cannot enter into ICPC-governed arrangements for interstate placements of children under their jurisdiction. In 1982, the Association of Administrators of the Interstate Compact on the Placement of Children surveyed 38 tribes to determine their interest in being enabled to participate in the ICPC. There was little interest at that time.

The fact that tribes are not parties to the ICPC has raised problems in at least two of the study states where tribes have wished to place children under their jurisdiction in substitute care settings in other states. A State-level official in one of these states said, "Tribes make the interstate placements themselves and sometimes want courtesy supervision [by public programs in the other states], but the States won't [do the supervision] without the proper paperwork." This situation "delays placement of the child in many circumstances." State officials in this state are exploring the feasibility of concluding a State-Tribe agreement that would make it possible for tribes in the state to make interstate placements under the ICPC.

A State-level official in another state pointed out that, while a "tribe can send a child to another state and retain jurisdiction, the child is not guaranteed a placement. The [receiving] State agency may do a courtesy supervision. However, if the placement breaks down, the [receiving] State must take over because the child is dependent. The tribe has no responsibility to go and get the child as a sending State would." In this state there have been efforts to develop agreements that would enable tribes to place children under the ICPC, but "the tribes have to give up too much and haven't [entered into an agreement] yet.

In a third field study state, the State agency and some tribes have approached the problem differently. There, some tribes desiring interstate placements of children under their jurisdiction have requested that the State agency arrange the placement on the tribes' behalf. In this circumstance, as a State respondent said, the State "sort of acts as the agent of the tribe."

7. **What do public officials understand the Indian Child Welfare Act's "full faith and credit" provision to mean? Do State courts give full faith and credit to tribal records and court rulings?**

The Act requires States to give full faith and credit to (that is, to recognize as fully valid and binding) Indian tribes' "public acts, records, and judicial proceedings" relating to child custody matters. During interviews, State and local public child welfare officials and State court judges were asked for their interpretation of that requirement.

All of the State-level officials and six of the local public administrators gave appropriate interpretations of this provision. An example of these responses is, "It means that the tribal court is to be considered to have exactly the same authority and power in child welfare cases as the district or State courts and has the power to direct a county system to order services just like the State court does. It gives the same credence to tribal court decisions as are given to State courts." Another respondent said, "[The department] follows the order of the tribal court just as we would follow the order of any other court. For example, if the tribe has terminated parental rights, the State court will enter an adoption decree without entering its own termination order first."

Two of the local public child welfare administrators said they did not know what the "full faith and credit" provision means and four gave an interpretation that reflects lack of understanding. Three of the four apparently confused this provision with jurisdiction requirements. "Tribal courts will have full jurisdiction over the case if they want it," "It requires agencies and courts to allow tribes to supersede," and "Some tribes can go into court, know they don't have money or resources, and ask for jurisdiction to give children to the relatives they were taken from." The other administrator said the provision requires public agencies to "be accepted by Indians here in [City]. We have three workers who are very familiar with Indian culture. We consult with people who are knowledgeable about Indian culture so we aren't just going in from a white middle-class perspective."

Nine of the eleven State court judges gave various versions of the response that, "what tribal courts do is valid" and "I would treat anything from that [tribal] court as from any [State] court." However, one State court judge said that the full faith and credit requirement means that, "If they want jurisdiction, they can have it." Another said it means that "Once a case is transferred, it is gone. This court has no more jurisdiction."

We asked the State court judges whether or not they had ever held that a tribal court's ruling not be given full faith and credit. All eleven said, "No."

We also asked eleven tribal court judges if they were aware of any instances in which child custody proceedings or rulings of their tribal court were not given full faith and credit by another court. Five of the eleven knew of at least one case--and one judge mentioned five cases--where a State court overrode a tribal court order. When asked where those State courts were located, tribal judges named Hawaii, Minnesota, Montana, Nebraska, Texas and Washington. In one case, the tribal court had remanded custody of children to the tribe but a State court placed the children in public custody. In another case, the tribal court had ruled on child custody in a marital dispute, but when the couple was divorced in a State court, the State court issues its own custody award. In a third case, the tribal court had reserved the right to intervene in a substitute care case if the State moved to terminate parental rights, but when the termination process was initiated, the State court refused to allow tribal intervention.

One tribal court judge related a situation involving two Indian parents from different tribes. In this instance, the custody ruling by one tribal court was not given full faith and credit by the other tribal court.

In discussing State court adherence to the full faith and credit provision of the ICWA, one tribal respondent reported that "It depends on the State's Attorney and [State court] judge." Another respondent said that "State courts do not appear to have respect or confidence in CFR courts [i.e., Courts of Indian Offenses established by the Code of Federal Regulations] because of their newness and lack of organization [and general] inefficiency of the system." It should be noted that none of the public officials interviewed for the field study expressed this view of Courts of Indian Offenses.

8. What procedures are followed to determine if an Indian parent is indigent and therefore has the right to court-appointed counsel? How frequently are Indian parents represented by such counsel?

The ICWA provides that, if a State court determines indigency of an Indian parent, the parent has the right to court-appointed counsel in removal, placement, or termination proceedings. Where State law does not provide for such appointment, then the BIA will pay the counsel's reasonable fees and expenses if certain requirements are met.

The eleven State court judges we interviewed were asked what procedures the court follows to determine indigency. Two said the court asks parents about their financial situation, and six, including all three from Arizona, responded that parents complete a financial affidavit. Of the remaining three, one said that the court "refers parents to the public defenders office, which applies its guidelines," one said that the written notification of the proceedings informs parents of their right to an attorney, and one responded that, "Indians are assumed to be indigent, and most are represented by an attorney at [a nearby off-reservation Indian center]." Some of the judges specifically pointed out that the same procedures are used for all parents, not just Indians.

Judges also were asked in how many cases in the past year indigent Indian parents had been represented in their courts by court-appointed counsel. Two judges, both in Arizona, indicated that all cases in their courts had had court-appointed counsel, three said "most" or "95 percent" of their cases had been so represented, and two gave numbers indicating that 40 and 19 percent of cases, respectively, fell into this category. Of the remaining judges, two did not know how frequently indigent Indian parents had been represented in their courts by court-appointed counsel; one said that neither of the two involuntary proceedings heard in the past year had involved such representation; and another reported having presided over no involuntary proceedings involving Indian children.

Lack of representation was a problem in ICWA implementation raised by some tribal officials. Several felt that State-appointed representation is important because scarcity of tribal funds prevents tribes from hiring attorneys to appear in families' behalf in State courts.

The 126 case records of children in public care under State jurisdiction were examined for indications that Indian parents had legal representation during early custody proceedings. In 29 percent of the 126 cases, presence or absence of legal representation could not be determined from the case record. Among cases in which representation could be determined, parents were represented in 71 (56 percent of the total, 79 percent of cases in which representation could be determined). Site-by-site data on representation is given in Table 5-4.

The reader should note that these findings do not reflect either the parents' financial situations, and thus their eligibility for court-appointed counsel, or the source of legal counsel (i.e., court-appointed, tribal, or privately retained) for those who were represented. The findings therefore do not address the issue of court-appointed counsel for indigent parents precisely.

9. How frequently is testimony by expert witnesses used in proceedings where foster care placement or termination of parental rights is ordered? What types of people appear as expert witnesses?

The Act prohibits State courts from ordering a foster care placement or termination of parental rights without evidence, including testimony by expert witnesses, that the parent's continued custody of the child is likely to result in serious emotional or physical damage to the child. The Guidelines state that, "Evidence that only shows the existence of family or community poverty, crowded or inadequate housing, alcohol abuse, or nonconforming social behavior does not constitute [such] evidence" (p. 67593). The Guidelines also say that persons most likely to qualify as an expert witness for Indian child custody proceedings are:

"(i) A member of the Indian child's tribe who is recognized by the tribal community as knowledgeable in tribal customs as they pertain to family organization and childrearing practices.

"(ii) A lay expert witness having substantial experience in the delivery of child and family services to Indians, and extensive knowledge

Table 5-4

Legal Representation for Indian Parents of Native American Children under State Jurisdiction in Public Child Welfare Programs

Legal Representation of Indian Parent(s) in Early Custody Proceedings	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N= 2)	Program B (N=12)	Program C (N=12)	Program A (N=13)	Program B (N=10)	Program C (N=13)	Program A (N= 0)	Program B (N= 0)	Program C (N=12)
	%	%	%	%	%	%	%	%	%			%
Parent(s) Had Representation	36.8	36.4	81.8	50.0	50.0	50.0	53.8	100.0	46.2	All children under tribal jurisdiction.		91.7
Parent(s) Did Not Have Representation	5.3	13.6	0	0	41.7	8.3	7.7	0	53.8			0
Unable to Determine	57.9	50.0	18.2	50.0	8.3	41.7	38.5	0	0			8.3

of prevailing social and cultural standards and childrearing practices within the Indian child's tribe.

"(iii) A professional person having substantial education and experience in the area of his or her specialty." (p. 67593)

The eleven State court judges we interviewed were asked how many times in the past year following involuntary proceedings they had ruled to place Indian children in substitute care and to terminate parental rights to Indian children, and in how many of these cases expert witnesses had appeared. Their reports on substitute care proceedings and termination of parental rights proceedings are related separately.

With regard to substitute care hearings, one judge had heard no cases of involuntary foster care and another could give no estimate for the number of proceedings over which he had presided. Among the remaining nine, two said that all cases in which substitute care was ordered had involved expert witnesses, two estimated that expert witnesses had testified for half of such cases, one each estimated that 30 percent and 10 percent of proceedings resulting in placement had involved expert witnesses, and three said that no expert witness had testified in any of these proceedings. The latter three judges had ordered substitute care for 2, 5, and "10 to 15" Indian children, respectively.

One of the judges who said that all cases of foster care placement had involved expert witnesses added, "if social workers are considered experts." Another stated that, "Many of the 'expert witnesses' used by [the public agency] are not my idea of a qualified professional."

The first of the judges whose cases had included no expert witnesses said that no testimony was called for because in both cases the mothers admitted the offense. This judge also asked the interviewer what was meant by "expert witness." The judge who had placed 10 to 15 Indian children in substitute care without expert witness testimony said that "expert witnesses are required for termination of parental rights, but not for foster care placement." In fact, the Indian Child Welfare Act requires expert testimony in both types of cases.

Proceedings to terminate parental rights to Indian children were much less common in these judges' courts. Five judges had heard no such cases in the previous year. Of those who had heard such cases, three had ruled for termination in one, two and three cases, respectively. Expert witnesses testified at the hearings in all of these cases.

Ten of the eleven judges were asked if certain types of people have appeared as expert witnesses in substitute care or termination proceedings. Eight said that county or State social workers had testified in this capacity, eight said that tribal social workers had appeared as expert witnesses, and four said that others knowledgeable about the child's tribe's culture had testified. Asked to name any other expert witnesses, three judges identified psychologists, two identified physicians, and one each named guardians ad litem, psychiatrists, a probation officer who also is a tribe member, a tribe member who is the child's aunt, and a State Indian attorney.

The eleven tribal court judges we interviewed were asked if they were aware of any instances in which a tribal social worker or other tribal child welfare official sought to testify as an expert witness in a State court proceeding but was not accepted by the court. Only one tribal court judge answered affirmatively. This judge knew of two such situations--one in Colorado, one in Nebraska. Tribal representatives were not allowed to testify because they are not attorneys. A tribal attorney appeared at one hearing and was required to present a law diploma and license before being accepted as a witness.

10. When an Indian parent voluntarily consents to a substitute care placement or to termination of parental rights, how do State courts assure that the consequences of that consent are explained in a language the parent understands? How frequently are interpreters used? What has been the outcome when parents have withdrawn voluntary consent to placement or termination?

In cases of voluntary placement or relinquishment, the Indian Child Welfare Act requires State courts to certify either that the parent fully understood the explanation of the implications of this action or that the explanation was interpreted into the parent's language. The parent can withdraw voluntary consent to substitute care placement at any time and can withdraw consent to termination at any time before the final decree of termination or adoption is entered. For two years after an adoption is finalized (unless State law allows a longer time), the parent can petition to have the adoption decree vacated if voluntary consent was obtained through fraud or duress.

The eleven State court judges at the study sites were asked about their courts' experiences in cases involving voluntary consent. One judge said voluntary placements in the local jurisdiction are handled by the public child welfare agency rather than the court and another said no voluntary cases had come before that court in the preceding year. Of the 9 judges who had been involved in voluntary proceedings during the year preceding their interviews, 7 had presided over an estimated total of 40 to 45 voluntary substitute care placements and 20 voluntary terminations. The other two did not know the number of voluntary cases in which they had been involved.

Among the nine judges with recent involvement in voluntary cases, seven indicated that they personally play a very active role in assuring that parents understand the implications of their consent. They give full explanations of parents' rights and the consequences of the actions the parents are taking and question parents closely to be satisfied that they are fully aware of the implications. Two of the seven said that attorneys for the parents also see to it that their clients are acting out of fully informed consent. The remaining two judges gave much briefer responses. One said, "We have a form [relating to voluntary placement]. We go over this in court." The other stated that, "Parents are given notice, and there is judicial inquiry."

The judges determine whether or not an interpreter is needed during the process of assuring that the parent understands the proceedings. Three judges indicated that the parent's caseworker and/or attorney also are responsible for identifying the need for an interpreter. Two judges reported that interpreters had been used in their courts during the preceding year--in one case for one judge, and apparently in two cases for the other. The other judges said that interpreters had not been used in the past year.

When asked how the court has located interpreters for Indian parents, six judges replied that an interpreter never has been needed in their court. Of the remaining judges, two identified local tribal bodies that are used to help locate interpreters, two said the court has information on local interpreters, and one said the court has had no difficulty locating interpreters in the county.

The nine judges who had been involved in recent voluntary proceedings were asked about instances in which voluntary consent had been withdrawn. One Minnesota judge, who did not estimate the number of voluntary cases over which he had presided during the past 12 months, responded that withdrawal of voluntary consent "can't happen under Minnesota statute." This assertion was not verified independently. If true, it is a contradiction of the Indian Child Welfare Act.

Six judges said that voluntary consent had not been withdrawn in any of the cases they had heard. Of these, 5 judges had been involved in a total of between 29 and 34 voluntary placements and 7 voluntary terminations during the preceding year and 1 did not estimate the number of cases. The seventh judge, who had presided over 10 placement and 10 termination proceedings, did not know if any of those consents had been withdrawn. The remaining judge said that consent had been withdrawn in one termination case, but that "the children weren't actually eligible under the Act, and parental rights were terminated."

11. Are the appropriate orders of preference for substitute care and adoptive placements followed?

The Indian Child Welfare Act specifies orders of preference for substitute care and adoptive placements of Indian children. For substitute care, a child is to be placed in the least restrictive setting that most approximates a family and that provides appropriately for any special needs of the child. Preference is to be given to placement with:

"(i) a member of the Indian child's extended family;

"(ii) a foster home licensed, approved, or specified by the Indian child's tribe;

"(iii) an Indian foster home licensed or approved by an authorized non-Indian licensing authority; or

"(iv) an institution for children approved by an Indian tribe or operated by an Indian organization which has a program suitable to meet the Indian child's needs."

In adoptions, preference is to be given to placement with:

"(1) a member of the child's extended family;

"(2) other members of the Indian child's tribe; or

"(3) other Indian families."

Information on the extent to which the orders of preference are being followed comes from several sources. The nationwide mail survey discussed in Part I of this report requested data on the race or ethnicity of the foster parents of Indian children in foster homes. Respondents to interviews conducted during the field study discussed some of the issues involved in adhering to the placement preferences and estimated the proportion of cases in which placement with Indian families is achieved. The case records reviewed at the local public child welfare sites provide additional information on this issue. Findings specific to substitute care placements are discussed in the next several paragraphs, followed by findings on adoptive placements.

Substitute Care Placements

Results of the mail survey (see Chapter 3, Table 3-9) suggest that, nationwide, Congress's intent that Indian children in substitute care be placed in settings reflecting their culture is not being met. Definitive conclusions are difficult, however, because most State child welfare agencies apparently do not have centralized information on the race or ethnicity of the foster parents of Indian children in public substitute care. The 19 public programs that provided any data on this topic account for only 57 percent of the Indian children in foster homes under public care, and the foster parents' race was unknown for many of these children. Among the public programs providing data, 35 percent of Indian children in foster homes were in homes where at least one foster parent is Native American, 40 percent were in non-Indian foster homes, and 25 percent were in homes where the race of the foster parents was reported as "Unknown."

In three of the four field study states, the State child welfare agency did not provide data for the mail survey on foster parents' race. The State agency in Minnesota reported that 55 percent of the Indian children in foster homes under public programs were in Indian homes. Findings from the field are presented below.

Respondents' Reports on Adherence to Placement Preferences

During interviews for the field study, a number of tribal respondents reported that the order of placement preference is not being followed by public programs. "A lot of Indian children are going into non-Indian ... or group homes." One reason for this is "public agencies do not have enough Indian foster homes" off of the reservations or trust lands. Another is that "State resources [are not being utilized] to recruit Indian families." One respondent indicated that public programs regard the placement issue as a trade-off. "Because tribes are not assuming jurisdiction, states are not pushing [placement preference] as hard."

Public child welfare program officials and State court judges in the same state, and even in the same jurisdiction, gave different reports on how well the order of placement preference is being observed. It is our impression that in several instances these discrepancies reflect a failure to monitor what actually is occurring with regard to Indian placements.

In three of the four states, State-level child welfare officials said the public agencies in their respective states generally are able to follow the order of preference for foster care placements specified in the Act. The local child welfare administrators interviewed in those three states painted a different picture. With the exception of the two South Dakota public agencies that are located on Indian reservations, only one local administrator in the three states reported that as many as half of the Indian children in care are in Indian foster homes or Indian-operated facilities. Another estimated the percentage to be 45 to 50 percent. One of the remaining five did not know the proportion for that program, and the others reported that 34, 30, 10 and 1 percent, respectively, of out-of-home Indian children are so placed.

These percentages are not related to the size of the Indian population in the area. The agency whose administrator reported 1 percent, for example, serves a county with a 1980 Indian population identical in size to that of the county served by the program reporting 50 percent. These two programs are located in the same state. The program whose administrator reported 34 percent of Indian children placed in Indian homes serves a county with a 1980 Indian population one-quarter as large as that in the county in the same state whose agency reported 50 percent Indian placements.

In the fourth study state, a State-level official responded "No" to the question of whether the public programs in the state generally are able to follow the order of placement preference. This respondent elaborated by saying, "All homes have to be licensed, but standards have not been addressed to license Indian homes. Recruitment [of Indian homes] has not taken place." In that state, one local public administrator did not know what percentage of Indian children in substitute care were in Indian foster homes or Indian-operated facilities. The other two administrators reported that, respectively, 70 percent and 10 to 15 percent of Indian children were in such placements.

Problems in Adhering to the Placement Preferences

State- and local-level public child welfare officials identified two primary problems in implementing the order of placement preference. The first of these, mentioned by respondents in all four states, is the lack of Indian foster homes and extended family members available to take children. Part of the reason for the lack of Indian homes lies in the difficulty in getting "Indian families to go through the licensing process. Questions are very intrusive. Many people feel uncomfortable with the required training." The child welfare official just quoted indicated that there is only one Indian foster family in the county, and that most Indian children are placed with relatives who are willing to undergo the required home study. A State-level administrator reported that, "in the cities, it's more difficult finding Indian families [and] some of the tribal agencies are having problems because of money." Observing the placement preference is particularly difficult with special needs children, whose handicapping or emotional problems may require more specialized home care than can be found in many homes, whether Indian or non-Indian.

A second issue raised by some public officials is locating Indian homes that are suitable substitute care settings. "Always having to place a child in an Indian home may not be in the best interests of the child. Some homes would not be licensed by the county."

State court judges were asked what difficulties they had encountered in adhering to the placement preferences specified in the Indian Child Welfare Act. Five of the eleven judges said they had encountered no difficulties and had never found cause not to follow the preferences. Interestingly, the local public child welfare administrators in the jurisdictions of four of these five judges reported that, respectively, 1, 10, 10 to 15, and 30 percent of Indian children in substitute care are in Indian homes or Indian-operated facilities. (The administrator in the fifth jurisdiction gave no estimate.)

The other six State court judges discussed difficulties they have had in following this provision of the Act. Four reported a lack of available Indian homes and the need to find more Indian families with which children can be placed. Even when there are Indian families in the area, they may not be able to take foster or adoptive children. "Many of the relatives can't care for themselves, and extra children are a burden." For one judge, the suitability of homes that are available is an issue. "It is not uncommon for extended family members to be not much better than immediate family." Another judge reported difficulty in finding Indian homes for special-needs children requiring in-home medical care.

State policies with regard to the use of tribally licensed foster homes affect the availability of Indian foster families. The ICWA provides for placement in foster homes "licensed, approved, or specified by the Indian child's tribe." Nonetheless, for at least one tribe with its own court and child welfare program, its licensed homes also must be licensed by the State in order for children to be placed there. The dual licensing requirement appears to contravene the Federal law. It certainly represents considerable duplication of effort. If the State's licensing standards are not compatible with Indian cultural and social standards, the requirement also may be discriminatory in its effect.

Case Record Data on Placements

The case records of Indian children in public care that were reviewed in the field study states also provide data about substitute care placements. For children still in substitute care when the record was reviewed, the current placement was noted, while for children no longer in substitute care, the final placement before leaving care was recorded.

Eighty-six percent of the children had been placed in a family setting, ten percent were in a group setting of some sort, and four percent were in other settings. For the 126 children under State jurisdiction these figures are 88 percent, 7 percent, and 6 percent, respectively, while for the 42 children under tribal jurisdiction the numbers are 79 percent, 21 percent, and 0 percent. These data indicate that the State courts in these locations are being somewhat more successful than tribal courts in directing placements into family settings.

Of the children living with foster families, 24 percent had been placed in the home of a relative. For children under State jurisdiction, this figure was 22 percent, while for children under tribal jurisdiction, the figure was 30 percent. Thus, while State courts place a somewhat higher percentage of children in families than do tribal courts, they place a smaller proportion of these children with relatives. Another 23 percent of the children in foster homes were living with Indian non-relatives, while 20 percent were in non-Indian homes and 34 percent were with families whose race could not be determined from the case records.

Adoptive Placements

Too few data on families who adopt Indian children are available to draw conclusions about States' adherence to the order of adoption placement preference specified in the Indian Child Welfare Act. Results of the mail survey indicate that 5 percent of Indian children discharged from public substitute care during the 1985-86 reporting year were adopted (see Table 3-17 in Chapter 3), but the race/ethnic backgrounds of the adopting families were not identified.

Of the 12 local public child welfare administrators interviewed for the field study, only 5 reported that their agency had placed any Indian children in adoptive homes during the preceding 12 months. Two Oklahoma administrators reported 1 adoptive placement each, two South Dakota respondents reported 5 each, and 1 Arizona official reported 10 such placements. One of the two children reported in Oklahoma and eight of the ten South Dakota children were reported placed in Indian homes. The Arizona administrator did not know how many of the 10 children from that program had been placed with an Indian family.

One local public administrator, discussing difficulties in adhering to the order of placement preference, expressed a concern about extended family placements that is specific to adoptions. "In adoption, we must explore the total extended family. Sometimes it keeps the child enmeshed in the situation that caused the initial trouble."

Case record data provide some additional information about adoptive placements. Of 173 public program case records reviewed, 9 were for closed cases in which the child had been discharged to an adoptive home. Of these nine children, two were adopted by a relative or other member of their tribe, four were adopted by an Indian family from another tribe, two were adopted by non-Indians, and one was adopted by a family whose race was not identified in the case record.

An additional 17 open case records were reviewed in which the case goal was for adoption. In 10 of these cases, either adoptive parents had not yet been identified or the race of the intended adoptive parents was not specified in the case record. An Indian relative, a non-relative from the child's tribe, and an Indian family from another tribe was the intended adoptive family for one child each. Two other children also were to be adopted by Indian parents, but their tribal affiliation was not indicated. The adoptive parents for the remaining two children were non-Indian.

Table 5-5 displays data on adoptive placements of Indian children at each of the 12 public agencies visited. Readers should recall that case records were not sampled randomly. Reviewers attempted to review records of at least two open and two closed adoption cases at every site, but this number often was not available. Where no adoption cases were reviewed, there either are no such cases or the appropriate case records were not available.

12. What factors promote effective implementation of the Indian Child Welfare Act?

During all 67 interviews conducted for the field study, respondents were asked for their general views on how well the Indian Child Welfare Act is being implemented. Their collective responses reveal no consensus on either areas of success or problems. Provisions of the Act that some said are being implemented effectively were named by others--including others in the same state and even in the same part of a state--as being problematic.

The most striking example of this relates to the Act's provision concerning notification of tribes and parents. In all field study states, some public program respondents and some tribal and/or BIA program respondents reported that the notification requirement is being implemented successfully while other public and tribal or BIA respondents said adherence to the notification provision is a problem. There is a similar pattern in comments on the Act's specified order of placement preference. Some public program respondents and some tribal and/or BIA program respondents in two states named this as a provision that is being implemented well, while other public and tribal/BIA program respondents in the same two states said this provision is being difficult to implement.

More instructive are respondents' views on the factors that promote implementation of the Act. Three public program respondents, for example, discussed reasons for success in following the order of placement preference. A State-level official in one state implied that having a State-administered child welfare system contributes to successful implementation. "We [i.e., the State agency] have control. It's our own staff [arranging the placements]." An official in a second state credited success to having staff who are "the kind of people [who will] dog it ... on a case-by-case" basis. Respondents also cited the "availability of Indian families as resources" and "recruitment efforts made by the counties" as critical factors. Another respondent believes that success in placing Indian children in Indian homes comes from having Indian family service workers in the child welfare system making recommendations about placement.

Public program respondents also identified more general reasons for success in implementing the Act. Two themes that emerge from their comments

Table 5-5

Identity of Adoptive and Intended Adoptive Parents of Native American Children in Public Child Welfare Programs

Identity of Adoptive and Intended Adoptive Parents	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A	Program B	Program C	Program A	Program B	Program C	Program A	Program B	Program C	Program A	Program B	Program C
Children Who Have Been Adopted												
	(N=1)	(N=0)	(N=0)	(N=1)	(N=2)	(N=1)	(N=0)	(N=1)	(N=1)	(N=0)	(N=0)	(N=2)
Indian Relative	-	-	-	-	-	-	-	1	-	-	-	-
Other Member of Tribe	-	-	-	-	1	-	-	-	-	-	-	-
Member of Other Tribe	-	-	-	-	1	-	-	-	1	-	-	2
Non-Indian	1	-	-	-	-	1	-	-	-	-	-	-
Unable to Determine	-	-	-	1	-	-	-	-	-	-	-	-
Children with Case Goal of Adoption												
	(N=1)	(N=1)	(N=2)	(N=1)	(N=0)	(N=2)	(N=0)	(N=2)	(N=0)	(N=2)	(N=5)	(N=1)
Indian Relative	-	-	-	-	-	-	-	-	-	-	1	-
Other Member of Tribe	-	-	-	-	-	-	-	-	-	-	1	-
Member of Other Tribe	-	-	-	-	-	-	-	1	-	-	-	-
Indian; Unable to Determine Tribe	-	-	-	-	-	-	-	-	-	-	2	-
Non-Indian	-	-	-	1	-	-	-	-	-	-	-	1
Unable to Determine	1	1	2	-	-	2	-	1	-	2	1	-

are the commitment of agency staff to implementation and the positive relationships established among public agencies or officials and Indian tribes and/or organizations. These themes are illustrated by the following comments from State-level respondents in the four states.

- [There is a] willingness by local staff to involve local tribes in the system as part of a team ... to get the job done.
- We had recognized tribal court orders and tribal jurisdiction for years. Also, in practice, we had been following [the] placement preference already. What the Act did was require us to document what we do and if we can't, why.
- County administrators believe in the provisions and make them work [with the help of staff] who actually carry them out. [In addition, agencies have] relationships with reservations (in rural areas) and Indian organizations (in urban areas).
- Informal relationships have been developed at the local level over time.
- Where you have a large Indian population, there are natural, good relationships already. [Provisions of the Act are] easier to implement when you already have a first-name relationship.

In addition to this emphasis on commitment to fulfilling the law and the development of working relationships with Indian tribes and organizations, successful implementation is predicated on the level of knowledge of the law held by State court judges, according to one public program administrator. Judges themselves named four factors as important in promoting implementation. These are:

- Passage of Federal statutes;
- Judges' education on and awareness of the Act;
- Very close cooperation between courts; and
- Dedication on everybody's part to comply.

Tribal, BIA and off-reservation Indian program respondents in each state recognize that many State and local agency staff are trying to follow the Act and observed that improvements are being made. Recurrent themes in their comments on areas of success include notification, placing Indian children with relatives, and State acceptance of tribal sovereignty and jurisdiction.

Implementation of the Act is enhanced by good relationships with State and local staffs, according to several tribal and BIA respondents, and State-Tribe agreements improve those relationships. Passage of a State Indian Child Welfare Act also has supported implementation efforts. A history of State programs working with the tribes has made a difference in another state which, "even before the Act, ... referred [Indian families] to the BIA or tribes for services." Improvements in the efforts made is attributable in part to "the system ... becoming institutionalized," that is, procedures and expertise having been developed to carry out the requirements of the Act.

Another aspect of the ICWA that many tribal respondents said is being implemented successfully is the development of tribal child welfare programs and the resultant provision of services by tribal employees (for example, "intervention services, being able to follow Indian children through counseling, etc., in and out of the home"). The underlying emphasis on the importance of tribal self-determination, self-sufficiency, and preservation of its members is echoed in respondents' comments that praise "having a judicial and social services system in place within the tribe," "having some impact on the decisions of the state courts, which respect our input," and "maintaining contacts with the children."

The role of training and technical assistance in the development of tribal programs is important. Some State personnel have helped "a lot," especially with respect to notification and education about the provisions of the Act. In one state, despite recent cutbacks in State funding and staff, the State child welfare program provided ICWA training to Indian staff and training on foster parenting to Indian and non-Indian foster parents.

The development of tribal capacities with respect to child welfare programming is, of course, a key component of the Indian Child Welfare Act. Tribal child welfare services are the focus of Chapter 6 of this report.

13. What factors impede implementation of the Indian Child Welfare Act?

Public, tribal, BIA and off-reservation program officials also identified problems that inhibit successful implementation of the ICWA. Among public program respondents, general implementation problems were attributed to the low incidence of Indian cases in some places (e.g., one child in five years); lack of prior experience and contact with tribes; turnover of staff; agency staff who would rather not have anything to do with the law and Indians; and tribes that are not accepting of State or local agency staff.

One State-level official, discussing reasons why some local public programs have been less successful than others in implementing the Act, said that some "[local agencies] have been unable or unwilling to provide all the services that are needed. (For example, Mom needs transportation services to visit kids placed on the reservation.) The intent of the law is not met in this respect. The intent of the Act is to prevent placement (and loss to the tribe), so services are needed." Underlying reasons for the difficulties enumerated here are, in the words of another public program respondent, "allocation of resources, jurisdictional issues, and prejudice against Indians."

Jurisdictional questions that affect implementation extend to cases involving Canadian Indians. The Indian Child Welfare Act does not apply to members of Canadian Indian tribes because those tribes are not recognized by the U.S. Government. Therefore, ICWA requirements such as notification and transfer of jurisdiction are not mandated. However, State laws, such as in Minnesota, may include requirements such as placement with relatives that apply whether or not the child's tribe is Federally recognized. This can result in numerous contacts with Canadian agencies within and across the provinces to locate extended family members. Questions of legal and fiscal responsibility arise frequently in such cases.

Another impediment to implementation identified by several public program respondents is inadequate support for tribal child welfare programs. This issue is explored more fully in the next chapter, which is devoted to tribal services.

State court judges identified barriers to implementation of the Act from the court's perspective. One judge said, "[This] county may as well not have an Indian Child Welfare Act. We do things the same as always." Some of the barriers named by other judges echo problems discussed by public child welfare staff. These are:

- Small Indian population in some counties or districts;
- Judges and public attorneys lack of familiarity with the law ("I served [in the public attorney's office] for years and didn't know the law existed.");
- "Reluctance [of some social workers] to place children on the reservation because of living conditions;"
- Lack of Federal funding to the tribes;
- Lack of tribal resources ("The intent was to have tribes become more involved in the provision of services. To some extent, they've become more dependent on the same system."); and
- "Concern about how to hold the tribes accountable for providing services and taking care of the children."

Interviews with tribal, BIA and off-reservation Indian center officials elicited a number of comments on barriers to implementation of the Act. Two problems were mentioned frequently: lack of sufficient funding for tribal child welfare services and proceedings, and the attitudes of some public officials. Other hindrances named were the paperwork involved, the lack of knowledge of the Act in some rural counties where there are few Indians, and the fact that not all tribes have recognized tribal courts that can decide on jurisdiction over proceedings involving its members.

The funding issue is an impediment to implementation cited over and over again by respondents in every state. Erratic and inadequate funding limits tribes' ability to develop preventive services; provide comprehensive remedial services, especially in special-needs cases; do any long-range program planning or staff recruitment that assumes stable funding; and accept jurisdiction from States, both because care-providing resources are not adequate and because tribes have limited funds to bring children back to the reservation from distant states. Financial problems influence not only social services but also legal matters of importance to the tribe, including operation of the court program; training for tribal judges and court personnel; hiring attorneys to represent tribal interests in state proceedings; and traveling to court hearings in other states. This paragraph represents a summary of respondents' comments on the program funding issue, which is addressed more fully in Chapter 6.

A second barrier to ICWA implementation identified by a number of tribal, BIA and off-reservation Indian center respondents is resistance among public agency staff. "They don't like dealing with the Indian Child Welfare Act ... and have only been working on implementation in the past four years." Some "individual judges [and] state agency personnel do not see the purpose or need of the Act." Others "do not accept Indian social workers in the process." One respondent articulated the situation as follows: "The agencies are attempting to meet some minimum standard [of adherence, but] only because of the consequences that happen if they don't--not in terms of intent .... There is a great deal of resentment because they have to do more for Indian children--more paperwork, more people involved--[and they ask] why it is necessary."

Despite the impression that "all counties are trying" to implement the provisions of the Act, one tribal official observed "some reluctance [by] county workers to intervene on behalf of children off of [Indian] lands." The problems relate to "misinformation, lack of knowledge, reluctance to get involved, and jurisdictional questions on the part of county workers." Another official was more blunt: "They're *capable* of doing a good job, but they don't do it."

14. What additional training related to the Indian Child Welfare Act do tribal, Bureau of Indian Affairs and off-reservation Indian center officials believe that public child welfare program staff need?

Twelve of the seventeen tribal, BIA and off-reservation child welfare program administrators interviewed believe that public agency staff are not adequately trained on the Indian Child Welfare Act and related topics. One or more of these respondents indicated that training or updating is needed on each of the following topics.

- Purpose and basic requirements of the Act.
- State/tribe jurisdictional issues; "defining boundaries and jurisdiction."
- Notification procedures and understanding the blood quantum issue.
- Standards of proof and requisite preplacement activities.
- Investigation, intervention, advocacy and follow-up reporting.
- Tribal structure and tribal government functions.

- o Understanding of tribes in the state.
- o How the tribal and State courts and tribal/BIA social service systems function and interact with the State welfare system.
- o How Indian families function, Indian child development issues, and working with Indian families.
- o Working with the Indian community (especially in urban areas) to recruit foster homes.
- o Provision of services to urban Indians (a "basic, but not comprehensive understanding").

Technical assistance for public agency staff also was recommended by one administrator to enable them to answer questions.

Training in the provisions of P.L. 96-272 also is needed, in the opinion of another administrator. One problem prompting this comment is that Indian parents complain to the State child welfare agency about their children's foster parents but the agency "doesn't investigate." In addition, treatment plans fail to address "root problems. Instead, the plans are pretty standardized (for example, 'Get alcohol treatment, attend Alcoholics Anonymous, and go to parenting classes')".

15. What impact has implementation of the Indian Child Welfare Act had on public child welfare programs and State courts?

State and local public child welfare officials and State court judges were asked to identify the impacts of Indian Child Welfare Act implementation. Their responses were quite diverse, but several themes emerged. Impacts named most frequently were increased awareness of and greater knowledge about Indian culture; changes in policies based on that increased understanding and on ICWA requirements; improved relationships with tribes and tribal child welfare programs; and an increase in required procedures and paperwork. There are intense differences of opinion regarding the Act's impact on protections for Indian children. Whether or not the Act has changed the frequency with which Indian children are taken into public custody, or what happens to those who are, received mixed evaluations. Interestingly, some impacts of implementation are seen as having positive effects on child welfare practices for non-Indian children. These themes are discussed below, and other impacts that received less frequent mention are identified.

The most frequently named impact of ICWA implementation, mentioned by eleven of the respondents, can be characterized as "consciousness raising." Many public officials, including administrators, direct-service workers and judges, have become aware that there is an Indian culture that differs in important respects from the majority American culture. They also have developed an appreciation for the importance of cultural heritage--both to the children, and to the Indian tribes who have experienced a steady erosion of their culture in recent generations. For example, "We are much more aware of cultural aspects, much more sensitive to the Indian population." "The Act generated greater awareness in the judicial system." "State staff was basically ignorant of Indian culture and tribal governments and lacked sensitivity to Indian people. The State staff have gone through tremendous growth and development in this area."

Increased awareness has been accompanied by increased knowledge--for example, of tribal governments, of the Indian extended family system, and of the implications of cultural characteristics for identifying problems and providing services. According to child welfare program respondents, "There has been an improvement in overall respect for tribal governments." "It's promoted more awareness of a need to know about Indian culture and look for relative placements." "Extended families are considered." "[We know that] the system must be sensitive to families moving on and off the reservation."

These changes in individuals' mind-sets have been translated into systemic changes in child welfare programs: new policies and procedures, new rules for interacting with tribes, new considerations in staffing and service delivery. "[The impact has been] quite tremendous in terms of policy development and provision of services through local staff." "We have done training and changed procedures." "State liaison positions were created by designating staff to liaison with tribes." "It's given more attention to ... the need for more Indian workers." "[Because of the Act there are] Indian staff on the county payroll for provision of services by people who understand the culture." It seems significant in this regard that eight of the twelve local public programs we visited have at least one Indian staff member, and the State child welfare agencies in Arizona, Minnesota and Oklahoma have a staff person whose primary responsibility is Indian child welfare issues.

Another impact, named by five child welfare program respondents, is increased contact and/or improved relationships between public child welfare agencies and Indian tribes. "There has been an effort from the [State agency] to work with tribes." "Lots of time was spent on preliminary meetings and working with tribes. Local staff are involved with tribal programs beginning with the child entering care. Agreements have formalized our working relationships." "We have had much more contact with tribes and tribal staff. As a side benefit, it is easier to locate extended families." "Absolutely! Everywhere, working relationships have improved."

In discussing the impact of ICWA implementation on their programs, some child welfare respondents spoke of increased procedural requirements. "Of course, our procedures obviously increased--making sure we met the requirements." "One more big thing we spent time developing." "[It has made things] more difficult, more complicated--especially when you're stressed as much as our staff is." "It's more of a nuisance to notify tribes, be sure they're aware [that one of their children is in custody], and then have them do nothing. We expend a lot of energy, see no results."

State court judges observe the impact of ICWA implementation from a somewhat different perspective than that of child welfare program personnel. The judges of whom we asked the question addressed different issues in assessing the Act's effects on the court. One judge echoed the theme voiced most frequently by child welfare personnel: "It brought heightened awareness of cultural importance regarding Indian children and families."

Four judges--three whose jurisdictions encompass urban areas and one whose court is near Indian lands--said there was no impact or minimal impact. "There's not much impact on the court system. There's not much difference between Indian kids and any other kids." "We notify tribes, they tell us if they're interested. Not that much impact." It seems worth noting that, in the local public programs associated with three of these four court jurisdictions, administrators interviewed and case records reviewed indicate that only small percentages of Indian children are being placed in accordance with ICWA requirements.

In contrast to these four, two other State court judges seemed to imply that the impact on the court was heavy-handed. "It certainly dictated to the court the preferences on placement." "[Without the Act] we wouldn't have ICWA consent or preference for Indian families or notify tribes."

Most respondents indicated that implementing the Act has expanded the role that tribes play in child welfare. Nine respondents view the increased involvement of tribes and the development of tribal child welfare resources as a benefit. "[For tribes, the Act] added some funding to implement programs and services. The tribes are working well with the State to benefit children." "[The Act has enabled] development of social service programs on reservations: Indian people serving Indian people." "It helps us work with Indians better when we can work with an Indian liaison [at the reservation]. We encounter distrust otherwise." "I was dubious about its value initially. Now I feel it's a resource because where the tribe gets involved, we have sincere, dedicated people working on the causes of abuse and neglect." "It's a benefit. It can keep children within the tribe and where the tribe wants them to be."

On the other hand, two local administrators and two judges do not view the return of children to tribal custody as a positive impact. "Honestly, I think the Indian children have not had continued service from the tribe. I am also unsure about the quality of care." "It is my personal observation that the State court works harder on [reunifying] children than the tribe does." "If tribes are going to have their own services, they need to get some social workers. The child is not the prime consideration of the tribe. The State provides more protection than the tribe." "Some judges felt skittish about putting a deprived child in the hands of Indians that had no court system or child welfare program. ... I've seen Indians who have not been able to sustain the good intentions of tribal programs to care for children. It's not reliable. A lot is due to lack of education of people in the tribe to make it work."

Three judges and a local administrator expressed serious concerns about the Act's evidentiary requirements and its consequences for protecting Indian children. "In a way it has caused discrimination against Indian children. Sometimes it's more difficult to provide protection for them than for other children." "It handcuffs us in the court process because of the level of proof we have to provide. The county attorney has regarded adoption as virtually impossible. We can't always give the children the level of service needed and kids are put through a longer period of limbo." "It's a disservice to Indian children. [Children need permanency. If a family cannot be reunified, the child should be freed for adoption.] The Federal ICWA requires a higher standard of proof, has grey terms and language, and is very value laden. Because it's very hard to prove that parents' rights should be terminated, kids stay in limbo, in permanent foster care. I see non-Indian kids being freed, and then I see Indian parents who for 2-3 years have demonstrated that they don't care, but I have trouble meeting the standard of proof beyond a reasonable doubt."

State-level officials were split on whether or not the Act has affected the number of Indian children in public custody. In two states, respondents said the numbers probably were lower. One of these officials pointed out that the reduction was at least in part the result of P.L. 96-272, the Adoption Assistance and Child Welfare Act of 1980. State respondents in two other states they said the ICWA has not decreased the numbers in public care. An official in one of these states said that permanency planning, rather than the ICWA, had had an impact on Indian prevalence rates.

State-level officials were similarly divided on whether or not the Act has affected where Indian children in public custody are placed. One respondent who said the impact on placement in that state had been minor explained that this is because "the State had always tried to place Indian children in Indian homes." Two local administrators volunteered that there now is "less placement of Indian children in non-Indian homes." A third administrator felt this is not necessarily a positive impact: "With all due respect for the cultural needs of children, I feel we are neglecting children physically when we place them in places where we would not put other children. Some of the homes [that tribes approve for placement] would not be approved by the State. The real need is to keep children in Indian homes if appropriate."

Effects of the ICWA that are specific to adoptions of Indian children were mentioned by only two respondents, both of whom indicated that adoption by white families has decreased. It seems probable that many of the comments already reported about keeping children within their tribes, preserving their heritage, and placing them with relatives and Indian families refer to adoptive placements as well as substitute care.

In discussing the impacts of the Indian Child Welfare Act, three local public administrators identified changes that are having positive effects for non-Indian children in public care. "The Act has heightened our sensitivity to the need for cultural preservation, and not just for Indian children." "It has helped to ensure that there is a routine review and planning of cases to determine the ethnicity of all clients." "[The Act has] probably done more to keep Indian families together by looking for relative resources rather than removing children and terminating [parental rights]. This change in practice has carried over into other cases that aren't Indian."

B. Cultural Awareness

Effective delivery of social services, including child welfare services, requires an understanding of a client's cultural background. Differing cultural values and norms have implications initially for determing whether or not a particular situation simply is a reflection of cultural differences or actually is a problem warranting outside intervention. When problems are identified, cultural background also has implications for the types of services that may be effective and the best ways to provide them.

Misinterpretations of Indian culture were one of the factors contributing to the large number of Indian children removed from their homes prior to passage of the Indian Child Welfare Act. The preamble to the Act includes the Congressional finding that, in child custody issues, "the States ... have often failed to recognize the ... cultural and social standards prevailing in Indian communities and families." This section describes efforts by public programs to recognize and accommodate the implications of cultural differences.

1. What types of training have public program child welfare caseworkers received on Indian culture and family life and their implications for casework practice? How do tribal, Bureau of Indian Affairs, and off-reservation Indian center officials evaluate public program staffs' understanding of Indian needs and values?

The extent of training on the implications of Indian culture for child welfare casework, which is distinguished here from training on the provisions of the Indian Child Welfare Act, is uneven across the four states and 12 public child welfare programs included in the field study. This undoubtedly mirrors the situation in the rest of the country. State-level officials in three of the four field study states indicated that the State child welfare agency has provided training on this topic. The general impression, however, is that responsibility for identifying and addressing this need on a programmatic basis falls to the local programs.

Training on Indian Culture

In one state, a team led by the State ICW coordinator had conducted seven half-day sessions related to this topic. None of the local administrators in this state mentioned this as a source of training for staff, however. One administrator said that 75 percent of that program's staff had received training on working with Indian families that included information on family dynamics, cultural aspects of Indian families, medical and lifestyle issues, and specific techniques for working with Indian families. A second reported that the core training for child protective services, received by all staff members at that site, includes training on how to work with cultural differences, and one trainer is Indian. The third identified "workshops and conferences" as sources of training for an unspecified proportion of the staff.

In a second state, the State agency had just finished a round of 2-day training sessions around the state. One of the two days included presentations by tribal representatives, some of which apparently related to this topic. State officials said that workers also had been sent to other workshops, and were cautioned to consider the sponsorship and be alert to possible bias. Despite this recent State effort, two of three local public administrators in this state reported that none of their staff had received training on working with Indian children and families. The third said this topic had been included in the State's 2-day training session attended by all staff.

In the third state in which a State official reported that the State agency had provided training on working with Indian families, the training comprised a 2-day statewide workshop conducted by a staff member from a regional office of the U.S. Department of Health and Human Services. Two of the three local public administrators in this state reported that 100 percent of their staff had received training on casework in the context of Indian culture. One of these identified the State workshop as one source of the training and a local Indian college as another. The second administrator named three sources of such training for staff: a professor/priest who is Indian had provided a 2-hour training session on Indian culture; an Indian staff member had done some co-worker training; and training on the ICWA by a local attorney had included cultural issues. The third local administrator in this state reported that 75 percent of the staff had been trained on working with Indian families. Sources named were college courses and one-to-one on-the-job training as new workers accompany experienced Indian staff.

The State child welfare agency in the fourth state has not provided training on working with Indian families. The child welfare administrator of one local public agency in this state reported that all staff receive in-service training on this topic. This official also stated that prospective staff are screened for bias against Indians during interviews. A second local administrator said that all social services staff recently had attended a 2-day in-service session on identifying service needs of minorities, including demographic trends, and that Indians were one of the minorities discussed. At the third local program, one staff member had received relevant training that included an Indian Health Service hospital session on working with Indian families on child abuse and neglect issues and a workshop on parenting conducted by a tribal social services program.

Cultural Sensitivity of Public Program Staff

The administrators of the tribal, BIA and off-reservation Indian child welfare programs visited for the field study were asked if they believe the public child welfare staff in their areas understand Indian needs and values. One of eight tribal program administrators, three of five BIA administrators and none of the four off-reservation officials replied "Yes." Six tribal program administrators, one BIA administrator and one off-reservation official replied "No." One BIA official did not reply, and the other three off-reservation respondents gave narrative responses. "It's a worker-by-worker question." "The Indian worker understands. I'm not sure about the other workers." "Who knows? Their one Indian staff has tried to sensitize them, but it's not realistic to put that burden on one person."

Indian program officials were asked for examples to illustrate their responses. A tribal child welfare administrator said local public program staff have shown sensitivity to Indian needs and values by calling the tribe in search of tribal connections for children and by asking for in-service training on tribal traditions. This respondent also noted that court training for all State workers includes discussions of ethnic issues. A BIA program respondent said the local public worker "understands the role of the grandmother and extended family." Two others said, "They accept and understand Indian family relationships and the strong bonding of extended families," and "Most staff try to be understanding of local problems."

Respondents who said local public staff do not understand Indian needs and values also gave examples, of which the following are representative.

- They believe Indian people should be assimilated.
- They have unrealistic expectations for Indian homes, assessing Indian homes by non-Indian standards.
- They wanted us to [provide money to] bury a child, but they were all aghast at our trying to bring traditional rites to the services.
- Case plans are not realistic. [They make] too many demands all at once, [impose] housing requirements beyond customary needs. Worker attitudes are pretty aggressive.
- Social and economic conditions are not understood in conjunction with being a minority.
- We have literally given information to the caseworker concerning Indian culture that has been ignored.
- [One example is] not checking out extended family. When teenagers are involved, they may consider [a group home] instead of extended family. They are not considering informal helpers that are around, such as an aunt or uncle, who may be able to lead a child in the right direction.
- They do not understand traditional reservation ways and what equals neglect. They do not understand what are myths and what are realities of behavior. There is a resistance of non-Indians to work with Indians.

2. Do public programs have bilingual staff or interpreters available for Indian parents who do not speak English? How often are they used as interpreters?

All six of the local public child welfare administrators we interviewed in Arizona and South Dakota reported having either bilingual staff or translators available. The frequency with which this resource is used varies from site to site. One Arizona administrator said that interpreters are used every day "for the comfort of our clients," and a South Dakota administrator said that interpreters are used at least once a week. In the other sites in these states, frequency of use ranges from "several times a year" to "once or twice a year or less."

In contrast to Arizona and South Dakota, none of the local administrators in Minnesota or Oklahoma said they had interpreter capabilities available for Indian parents. All three Minnesota administrators, however, named an organization or tribe they would contact if a translation were needed.

3. Have public programs reviewed their foster home licensing requirements for compatibility with Indian cultural and social standards?

State officials in all four states were asked if their agencies had reviewed their foster home licensing standards. Such review has occurred only in South Dakota. There, State child welfare officials met with tribal representatives in 1984 to discuss the State standards. According to a State-level respondent, it was the representatives' view that "expectations should be no less for Indian foster families than for others." In another field study state, the child welfare agency is planning to undertake that task if funding from the State legislature enables hiring an additional staff member.

C. Staffing and Services of Public Child Welfare Programs

The third section of findings focuses on the personnel and service resources of public child welfare programs. Topics include staff characteristics, size of the Indian substitute care caseload, services provided, availability and recruitment of Indian foster homes, and issues that arise in meeting requirements of the Adoption Assistance and Child Welfare Act when Indian children or families are involved. Also included are tribal, BIA and off-reservation Indian center officials' assessments of public services provided to Indian children and families.

1. What are the staff characteristics of public child welfare caseworkers? Are certain caseworkers designated to handle cases of Indian children and families? What proportion of public programs' total substitute care caseload are Indian children?

Table 5-6 summarizes selected characteristics of the child welfare workers at 11 of the 12 public programs visited for the field study. The number of staff ranges from 4, at one Minnesota and two Oklahoma programs, to 63 in a Minnesota agency. Eight of the programs include at least one Native American staff member. The three programs reporting that half or more of their staff members are Native Americans all are located in counties containing Indian reservations, although two of the programs reporting no Native American staff members also are located in counties that contain reservation or trust lands.

Table 5-6

Child Welfare Staff Characteristics of Public Child Welfare Programs

	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A (N=10)	Program B (N=26)	Program C	Program A (N= 9)	Program B (N= 4)	Program C (N=63)	Program A (N= 4)	Program B (N=11)	Program C (N= 4)	Program A (N=14)	Program B (N=13)	Program C (N=12)
Race/Ethnicity	%	%		%	%	%	%	%	%	%	%	%
Native American	20.0	3.8		11.1	0	4.8	0	9.1	50.0	57.1	62.0	0
White	70.0	73.1	Data not provided.	88.9	100.0	52.4	100.0	63.6	50.0	42.9	38.0	100.0
Black	0	7.7		0	0	6.3	0	18.2	0	0	0	0
Hispanic	0	15.4		0	0	3.2	0	0	0	0	0	0
Asian	10.0	0		0	0	1.6	0	0	0	0	0	0
Unknown/Not reported	0	0		0	0	31.7	0	0	0	0	0	0
Education	%	%		%	%	%	%	%	%	%	%	%
Master's, social work	20.0	30.8		0	25.0	22.2	0	9.0	25.0	0	0	0
Master's, non-social work	40.0	15.4		0	0	7.9	0	27.3	0	7.1	0	16.7
Bachelor's, social work	20.0	26.9		44.4	50.0	20.6	0	0	0	0	30.8	41.7
Bachelor's, non-social work	0	26.9		55.6	25.0	17.5	100.0	36.4	75.0	28.6	61.5	41.7
Some college, social work	0	0		0	0	0	0	0	0	21.4	0	0
Some college, non-social work	10.0	0		0	0	0	0	0	0	35.7	7.7	0
Less than high school	0	0		0	0	0	0	0	0	7.1	0	0
Unknown/Not reported	10.0	0		0	0	31.7	0	27.3	0	0	0	0
Child Welfare Experience	years	years		years	years	years	years	years	years	years	years	years
Mean*	4.5	8.3		6.3	7.9	9.0	5.8	6.3	13.5	4.4	1.5	4.6
Median*	3.0	8.0		4.0	3.4	9.0	6.0	5.0	14.5	3.0	1.0	3.0
Employment Status	%	%		%	%	%	%	%	%	%	%	%
Full-time	90.0	92.3		88.9	100.0	63.5	100.0	0	100.0	100.0	100.0	100.0
Part-time	0	7.7		11.1	0	4.8	0	0	0	0	0	0
Unknown/Not reported	10.0	0		0	0	31.7	0	100.0	0	0	0	0

*Means and medians are based on workers for whom data were reported and are approximations. They probably underestimate the true numbers somewhat because years of experience usually are rounded down in reporting. Persons with between 5 and 6 years of experience, for example, probably were reported as having 5 years of experience.

Six of the public programs have at least one person on the staff with an MSW (Master's degree in Social Work), and in two programs at least half of the staff have a Bachelor's or Master's degree in social work. The median years of child welfare experience ranges from 1 to 14.5 years and is 5 years or more at 5 of the programs. All staff are full-time at 6 of the programs.

The twelve local public program administrators were asked if certain caseworkers are designated to handle cases of Indian children and families. None of the programs has such an arrangement. Rather, Indian families can be assigned to any caseworker on the staff.

The administrators also were asked what proportion of their program's total substitute care caseload is Indian children. Their responses were as follows.

Agency	% Indian Cases	Agency	% Indian Cases
(Arizona)		(Oklahoma)	
Flagstaff District	15-20%	Caddo County	50%
Phoenix District	5-8%	Comanche County	10-15%
Tucson District	15%	Osage County	25%
(Minnesota)		(South Dakota)	
Beltrami County	67%	Mission	100%
Carlton County	48%	Pine Ridge	100%
Ramsey County	7%	Sioux Falls	20%

2. What services are provided to Indian children and families by public child welfare programs? For which services do the programs make referrals?

State-level public child welfare officials were asked which of 18 child welfare services to prevent foster care placement and promote reunification after a child is placed in care are provided by local public programs in their states. Their responses are summarized in Table 5-7. Programs in three of the four states provide caseworker counseling, family counseling, child care, and transportation services. In two of the states, public programs provide mental health services, financial services, food banks, parenting classes, and youth activities. Officials in two states mentioned two additional services each that are provided by local programs in their states.

State officials also were asked to identify the services for which local programs make referrals. This information also is summarized in Table 5-7. Referrals to eight services are provided by three states each: physical health services, housing assistance, employment services, educational or vocational services, legal services, parenting classes, early childhood programs, and parent, teen or adult support groups. Programs in two states refer for drug and alcohol treatment, financial services, homemaker services, food banks, and transportation services.

Table 5-7

Services for Clients of Public Child Welfare Programs

Service	Number of States in Which Programs Provide Service Directly	Number of States in Which Programs Provide Referral for Service
Therapy from a psychologist/ other mental health services	2	1
Caseworker counseling	3	
Family counseling	3	1
Drug or alcohol treatment	1	2
Physical health services	1	3
Financial services	2	2
Housing assistance	1	3
Employment services	1	3
Educational or vocational training		3
Legal services		3
Homemaker services	1	2
Food bank	2	2
Parenting classes	2	3
Child care	3	1
Early childhood programs	1	3
Parent, teen or adult support groups	1	3
Transportation	3	2
Youth activities	2	1

Others mentioned as provided:

- Parent aides
- Day support programs
- Family-based services
- Independent Living

3. How many Indian foster homes are available for children in public care? What efforts do public programs make to recruit Indians as foster and adoptive parents?

Except for public programs that are located on reservation lands, the public programs we visited have very few Indian families available to provide foster homes. State-level efforts to recruit Indian foster and adoptive families vary widely, ranging from essentially no effort in one state to multi-strategy recruitment programs in others. The same is true at the local level. Where there are recruitment efforts, they generally employ standard public relations techniques. There seems to have been little exploration of outreach methods that build on Indian norms and traditions.

The 12 local public child welfare administrators interviewed for the fiel study were asked how many Indian foster homes their agencies have, including homes already caring for children as well as those available but not currently being used. One respondent did not know, one reported no Indian homes, six said there were between one and five such homes available, and two reported nine and ten Indian homes, respectively. The two South Dakota public programs that are located on Indian reservations had larger numbers--16 homes at one site and 60 at the other.

The local administrators also were asked how many Indian families had applied to be foster homes in the preceding five years, and how many of these had been accepted. Three administrators did not know the number of applicants, although one of the three, whose program is located on a reservation, said that 38 families had been approved as foster homes during that time. One administrator said that no Indian families had applied to be foster families. Seven of the remaining eight reported applications from between one and seven families. All applicants had been accepted in three of the sites, five of six, three of five, and one of three had been approved in three others, and both applications were pending in the seventh. The last administrator, operating a program on reservation lands, said that 50 to 60 families had applied during that time period and 75 percent had been accepted.

State-level officials in the four field study states were asked to describe efforts made to recruit Indian foster or adoptive homes. In one state, the only effort that could be reported was, "We contracted with two agencies, i.e., Blacks and Hispanics, for foster care." Other states described more extensive activities. Two had received Federal adoption grants with which each hired an adoption worker. In one state, the worker--a Native American--concentrated on recruiting families at a large reservation. In the other state, the person hired under the grant developed a program to assist local programs in recruiting minority staff to locate and recruit adoptive homes.

Officials in one of the two states using the Federal adoption grants described other strategies to recruit Indian foster and adoptive families. These include recruitment pamphlets that depict only Indian children, posters and brochures in the predominant tribal language in the state, ongoing contacts with national adoption exchanges such as the Council of Three Rivers, TV coverage of children needing adoptive homes that included Indian children, and a breakfast for church leaders hosted by the Governor to encourage recruitment of foster homes for special needs children, including Indian children.

In the fourth state, a State-level official reported that there are agreements with tribes to recruit and refer Indian homes. The State also conducts a year-round recruitment effort emphasizing Indian homes. This has included a TV campaign on special needs children including Indians.

Local public child welfare administrators also were asked to describe recruitment activities. Three of the twelve said there had been no particular effort to recruit Indian foster homes, a fourth said such activities are not the responsibility of the administrator, and a fifth said the close proximity of an Indian tribe made special activities unnecessary.

The remaining administrators described various recruitment activities conducted by their programs. These include contacting tribes and off-reservation Indian agencies and centers to assist in identifying families; conducting a minority family recruitment campaign; working with recognized Indian leaders to identify candidates; advertising at churches, on the radio, in the newspaper and through brochures; and contracting with an Indian organization to recruit and license foster homes. Two administrators reported that their agencies have an assigned recruitment worker.

4. Do public programs encounter any special problems in meeting requirements of the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) when Indian children or families are involved?

Officials in two states commented on problems related to the distances sometimes involved in the placement of Indian children. One of these comments referred to the requirement that children be placed near their homes. The problem in this regard arises if the child's home is on or near a reservation in a rural part of the state, but the needs of the child require placement in a specialized facility located in an urban center. In such cases, the needs of the child conflict with the proximity requirement. The other comment about distances pertained to the requirement that visitation between parent and child be encouraged. A problem develops if the child is placed some distance from where the parent lives because "[local programs] often refuse to pay for transportation when 'reasonably far' distances are involved."

Another difficulty applies to situations where tribes are providing child welfare services for the State under IV-E contracts or other mechanisms. In these cases, the State must be able to document that tribal services and case records are meeting the Federal requirements for public programs. Officials in two states indicated that this sometimes presents problems. "On reservations, case plans and orders from the tribal court are difficult in developing or meeting standards. The paperwork is tremendous." "There is a problem if you're relying on data other than your own. Adding a component of other record keeping complicates things. Compliance relies on how well everyone is keeping records."

In one of the states where tribal courts hear some of the cases of children in public custody, State-level officials said that there sometimes are problems meeting case review requirements when tribal courts "run out of money and so have to close down for awhile." "Lack of [tribal] resources is an ongoing problem." On the other hand, when tribal courts in that state are funded, "It appears that in most cases the tribal courts are reviewing cases every three months, so it's a little easier [than with non-Indian cases] to meet the requirements for semi-annual case review and 18-month dispositional hearings."

5. What do tribal, Bureau of Indian Affairs, and off-reservation Indian center officials regard as the strengths and weaknesses of the services provided to Indian children and families by the public programs in their areas?

Administrators of the tribal, BIA and off-reservation child welfare programs visited for the field study were asked to identify strengths and weaknesses of services provided by the public program near them. The most frequently cited strength, mentioned by five respondents from different locales, is the more extensive resources of the public programs. These include more funds, more staff, more services--including medical and shelter care and group homes--and the ability to be on call 24 hours a day.

Two respondents indicated that the Indian Child Welfare Act represents the greatest strength for public services. "The strengths lie in the legislation." "The principal strength is the legal authority to force some change in [procedures] that could be harmful to the child."

Five other respondents credit public programs with which they work with earnest efforts to respond to Indian concerns or build good relationships with Indian programs. Two noted that there are Indian social workers on local public program staffs. Another said, "They are concerned that children are Indian and will call the tribe." A fourth saw progress in the fact that "They have begun to see us as resources." Said the fifth, "Cooperation is the #1 strength. Communication is a good strength. There is no hesitancy in talking."

A few respondents identified aspects in which nearby public programs are stronger than their own. For example, "They are more experienced with child welfare cases." "They have a better structure for child welfare services." "They are immune from the tribal political system; they don't have to deal with parents running to [the tribal] Council to complain."

One or another tribal, BIA or off-reservation Indian center respondent identified other strengths. These include quick response to reports of child abuse and neglect (They come in like the IRS!); a good reporting system; accountability; foster home licensure investigations; "trying to get services for the family;" and the fact that "the agency knows the system quite well and serves children quickly."

Tribal, BIA and off-reservation Indian center administrators also identified weaknesses in the services given by public programs near them. Many comments in this regard relate to the issue of culturally relevant services for Indian children and families.

The weakness cited most frequently was "ignorance of Indian culture and Indian people," which was discussed directly by five respondents. "There is a lack of awareness of informal--that is, family--resources that can be utilized. [Public program staff] don't know about this. The client may not offer the information and workers may not bother to investigate." "[The local public program] needs more Indian-sensitive workers." "Cultural differences are not always of concern." "[They have a] lot of people who don't have knowledge about Indian culture and history and have chosen not to get that information."

Other respondents commented on related problems. For example, Indian program administrators in three locations named lack of Indian foster homes as a weakness of public services. Three other respondents said lack of Indian staff is a problem. One administrator said that public staff's failure to understand the background and intention of the Indian Child Welfare Act limits their ability to serve Indian families effectively. Another observed that public personnel "do not have knowledge about chemical dependency, which is a must" when working with a Native American population. An off-reservation Indian center official said the center's staff could help bridge the cultural gap, and saw as a weakness that the local public program fails to "use us as a resource and see how we could help them meet children's needs."

Other weaknesses were identified. For example, two Indian administrators said that "children are separated too far away for too long." "Foster homes are separated in distance from the Indian families. This discourages extended family and parents from visiting children." A tribal program administrator observed that, "[Public program staff] expect the tribe to immediately take the case and handle [all the services a child may need]."

Several Indian program respondents recognized the constraints within which public programs in their areas operate. Two identified limited funds as hampering public services. Two others mentioned high staff turnover as a problem, with one pointing out that high turnover results in "fewer people trained to work with Indian families." Three respondents said that public programs in their areas are understaffed and/or the staff are overworked. In commenting on this problem, one respondent said, "They are overburdened in work and children do not get services. Only parents get services. This is a critical problem throughout the state. Foster care workers are seen as case managers, not direct service providers."

D. Substitute Care Casework Practices

The final section of this chapter presents additional data from case records of 173 Indian children in public substitute care. These data relate to case planning and management practices required of public programs by Public

Law 96-272, the Adoption Assistance and Child Welfare Act of 1980. The method by which case records were selected for review is described in Chapter 4. Also given in that chapter are background characteristics of the sampled children.

1. What efforts do public child welfare programs make to prevent placing Indian children in substitute care?

Forty-one percent of the public program case records contained some documentation of efforts made by the program to prevent removing the child from the home. The preventive activity mentioned most frequently is counseling by a caseworker, which occurred in 84 percent of the cases in which preventive efforts were noted in the case record. In 42 percent of the cases, the public program had provided or made referrals for chemical dependency evaluations and/or substance abuse treatment, including Alcoholics Anonymous. Referrals for mental health services were made in 30 percent of the cases and referrals for health services were made in 7 percent. Day care, homemaker, and financial services were provided or referred for two to three cases each.

2. When Indian children must be placed in substitute care, into what types of settings are they placed?

As discussed under Question 11 in the first section of this chapter, the Indian Child Welfare Act specifies a preferred order of placement for Indian children placed by public child welfare programs. Some information about the substitute care settings of 173 children in public care whose case records were reviewed was presented with that discussion. Additional data are reported here.

Eighty-six percent of the children had been placed in foster homes. Of these, 24 percent were placed with relatives, 23 percent with Indian non-relatives, 20 percent in non-Indian homes, and 34 percent in homes the race of which could not be determined from the case records. Thus, less than half of these children were in foster homes identified as having Indian parents. Ten percent of the children were in group settings--either group homes, child care institutions, or residential treatment facilities. The remaining four percent were in emergency placements, "other" settings, and a setting that was not identified.

As a group, these 12 programs have a higher percentage of children in foster homes and a smaller percentage in group settings than was reported by public programs nationwide in the mail survey portion of this project. As shown in Chapter 3, Table 3-8, 77 percent of Indian children in public care nationwide are in foster homes, while 16 percent are in group facilities.

Site-by-site data on the substitute care placements of these children are reported in Table 5-8. In four of the twelve programs, all children are in foster home settings. The proportion of children in the care of relatives ranges from none to 55 percent, as does the percentage of children in non-relative Indian homes. In seven of the programs, more than one-fourth of the children are in foster homes whose racial background could not be determined

Table 5-8

Substitute Care Settings of Native American Children in Public Child Welfare Programs

Substitute Care Setting	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N=12)	Program B (N=12)	Program C (N=12)	Program A (N=16)	Program B (N=11)	Program C (N=13)	Program A (N=14)	Program B (N=18)	Program C (N=13)
	%	%	%	%	%	%	%	%	%	%	%	%
Foster Home:												
Relative	26.3	18.2	54.5	33.3	25.0	0	6.3	18.2	15.4	21.4	27.8	0
Indian Non-relative	10.5	13.6	0	25.0	25.0	8.3	12.5	54.5	7.7	42.9	38.9	0
Non-Indian	15.8	4.5	9.1	8.3	8.3	16.7	12.5	18.2	23.1	7.1	0	92.3
Race Unknown	47.4	45.5	36.4	8.3	16.6	41.7	56.3	9.1	38.5	28.6	0	0
Group Home	0	0	0	16.7	8.3	0	0	0	0	0	27.8	0
Child Care Institution	0	0	0	0	0	0	0	0	0	0	5.6	0
Residential Treatment Facility	0	18.2	0	8.3	8.3	16.7	0	0	0	0	0	7.7
Emergency Home or Shelter	0	0	0	0	8.3	16.7	0	0	7.7	0	0	0
Other Setting	0	0	0	0	0	0	6.3	0	7.7	0	0	0
Unable to Determine	0	0	0	0	0	0	6.3	0	0	0	0	0

from the case record. Only three programs have placed children in a group home or child care institution, including one of the South Dakota programs where all children whose records were reviewed are under the jurisdiction of the tribal court. Children from five programs were in residential treatment facilities.

3. What goals for permanency are established for Indian children in out-of-home care?

Results of the nationwide mail survey indicate that 64 percent of Indian children in public care nationwide have a case goal that will place them in a permanent family setting. That is, 43 percent have a goal of reunification with their parents or other previous caregiver, 8 percent are to be placed with non-parent relatives, and 13 percent have a goal of adoption. For another 19 percent of the children, the case goal is long-term foster care, and 4 percent are to be emancipated upon reaching the age of majority. The remainder of the children have other goals or no goal established (see Chapter 3, Table 3-10).

In comparison, 75 percent of children whose case records were reviewed have a case goal that involves a permanent family: 53 percent have a goal of return home, 11 percent have a goal of relative placement, and 11 percent have a goal of adoption. The case goal is long-term foster care for 13 percent and emancipation for 2 percent. Five percent have other goals, and goals could not be determined for the remaining five percent.

Table 5-9 displays data on case goals for each of the 12 public programs. Most--but not all--of the programs appear to be working toward family-based permanency for a large majority of the children. More than half of the children have return to their own home as a goal in eight of the programs. The proportion of children who have some form of family permanency as a goal ranges from 36 to 93 percent and is 63 percent or more in 11 of the 12 programs. Five programs have assigned long-term care or emancipation to more than ten percent of cases, and in one program this is the goal for more than half of the children whose records were reviewed.

4. What proportion of Indian children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

The presence of written case plans was frequent, but it appears that having parents sign the case plan is not a common practice. Written case plans appeared in 74 percent of the case records that were reviewed, although only 21 percent of the records contained plans that had been signed by the parents. Case plans were absent from 23 percent of the records. As shown in Table 5-10, the proportion of case records containing case plans ranges from 50 to 100 percent, while the proportion of records including plans that are signed ranges

Table 5-9

Case Goals for Native American Children in Public Child Welfare Programs

	Arizona			Minnesota			Oklahoma			South Dakota		
Case Goal	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N=12)	Program B (N=12)	Program C (N=12)	Program A (N=16)	Program B (N=11)	Program C (N=13)	Program A (N=14)	Program B (N=18)	Program C (N=13)
	%	%	%	%	%	%	%	%	%	%	%	%
Return Home	42.1	27.3	36.4	41.7	66.7	58.3	56.3	63.6	53.8	71.4	61.1	76.9
Placement with Relative	31.6	4.5	9.1	33.3	8.3	0	6.3	9.1	23.1	7.1	0	0
Adoption	10.5	4.5	18.2	8.3	0	16.7	0	18.2	0	14.3	27.8	15.4
Long-term Foster Care	10.5	45.5	9.1	8.3	8.3	8.3	12.5	9.1	7.7	0	5.6	7.7
Independent Living or Emancipation	0	9.1	9.1	0	0	0	0	0	0	0	5.6	0
Emergency Care	0	0	18.2	0	0	0	6.3	0	0	0	0	0
Other Goal	0	9.1	0	8.3	0	8.3	0	0	0	7.1	0	0
Unable to Determine	5.3	0	0	0	16.7	8.3	18.8	0	15.4	0	0	0

Table 5-10

Prevalence of Written Case Plans and
Voluntary Placement Agreements for Native American Children in
Public Child Welfare Programs

	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N=12)	Program B (N=12)	Program C (N=12)	Program A (N=16)	Program B (N=11)	Program C (N=13)	Program A (N=14)	Program B (N=18)	Program C (N=13)
Presence of Written Case Plan in File	%	%	%	%	%	%	%	%	%	%	%	%
Plan Present, Signed by Parent	0	9.1	0	41.7	0	33.3	6.3	0	0	71.4	44.4	53.8
Plan Present, Not Signed	84.2	68.2	90.9	41.7	83.3	41.7	50.0	100.0	69.2	7.1	5.6	0
No Plan	15.8	22.7	0	8.3	16.7	25.0	37.5	0	23.1	21.4	44.4	46.2
Unable to Determine	0	0	9.1	8.3	0	0	6.3	0	7.7	0	5.6	0
Voluntary Placements												
Number of Voluntary Placements	4	7	0	3	1	5	2	2	1	0	2	1
Percent with Written Voluntary Placement Agreement Present in File	75.0	71.4	-	100.0	100.0	40.0	100.0	0	100.0	-	50.0	0

from none to 71 percent. In four programs, 25 percent or more of the case records reviewed contained no case plan.

Among the 173 case records reviewed, 28, or 16 percent, are for voluntary placements. A written voluntary placement agreement between the parent and the child welfare agency was found in the case record of 64 percent of these cases.

Table 5-10 displays the number of voluntary placements among the cases reviewed at each program. The prevalence of such cases ranges from none to seven. In one Arizona and one Minnesota agency, the proportion of cases reviewed that were voluntary placements is 32 and 42 percent, respectively. At four programs, representing a total of seven voluntary placements, a voluntary placement agreement was in the case record for all children placed voluntarily. At the other sites with voluntary placements, the percentage of these cases with written agreements in the record ranged from 0 to 75 percent.

5. By whom and how often are cases reviewed?

The 12 local public administrators in the field study and the State or tribal court judges in those 12 sites were asked about administrative and judicial reviews of substitute care cases. Their responses indicate that all 12 programs employ at least two case review mechanisms to monitor progress and assess the continuing appropriateness of the current case goal.

Court reviews are the most prevalent, occurring in all 12 sites. In eight of the ten sites in which cases are heard by State court judges, both the State court judge and the public administrator said that each case is reviewed by the court at least every six months. In a ninth site, the judge said court reviews are semi-annual while the administrator said they are annual. In the tenth jurisdiction, both the judge and the administrator reported annual court reviews. In the other two sites, tribal courts review cases every three to six months.

Nine of the programs use an agency review committee to review substitute care cases. This includes all three Minnesota sites and two of the three agencies in each of the other three states. These groups review each case twice a year in three programs, "as needed" or "irregularly" in another three, annually in a seventh, and every 18 months in an eighth. The committee was just being organized in the ninth site and a schedule had not been established.

Citizen review boards review cases for all three Arizona and all three Minnesota programs. These reviews take place every six months in two locations in each of these states, on an ad hoc basis in the third Arizona site, and every three to six months in in the third Minnesota agency.

Supervisory reviews also are performed in the three Arizona and three Minnesota agencies, as well as in one Oklahoma program. According to administrators' reports, these reviews are weekly, bi-weekly and semi-annual in one program each, monthly in two sites, and quarterly in two sites.

The agency administrator reviews cases in four agencies. Cases receive this inspection semi-annually in two sites and annually in a third. In the fourth program, the administrator reviews a sample of cases each quarter.

Multi-disciplinary review teams are a sixth review mechanism. These are used in three sites--on an ad hoc basis in one, every six months in a second, and on a schedule not yet determined in the third.

Two of the Arizona programs reported using all six of the review mechanisms just discussed. One Oklahoma and one South Dakota program each employ four of the six methods of monitoring cases. Five sites have established three case review processes, and the remaining two use court reviews and agency review committees as their case review mechanisms.

Additional information on the frequency of case reviews was obtained from the case records examined at each public program. From previous studies, we know that case reviews are not always documented in child welfare case records. This seems to be true of non-court reviews in particular. Thus, the case review data collected for this study may reflect the diligence with which reviews are documented at these sites as well as the frequency with which they are conducted.

Of the 173 case records examined, 127, or 73 percent, contained information on what appeared to be the most recent case review prior to our site visit (for open cases) or the last review before the case was closed. Among these cases, 85 percent had been reviewed within the preceding six months, 12 percent had been reviewed within the past six to twelve months, and 3 percent had last been reviewed at least twelve months earlier. Among all of these cases, the average elapsed time since the most recent review was 3.7 months. For 78 percent of the cases, the most recent review had been conducted by the court.

Table 5-11 reveals that both the recency of reviews and the apparent completeness of case records on this topic varies greatly among the twelve sites. The percentage of cases that had been reviewed within the preceding six months ranges from 15 to 83 percent. The figure exceeds 80 percent in two programs and falls below 50 percent at three. The average elapsed time per site ranges from 1.8 to 9.9 months. At five programs, the most recent review could not be determined for more than one-third of the cases.

6. How long do Indian children in the care of public child welfare programs remain in substitute care? How many different placements do they have while in care?

In the nationwide mail survey reported in Part I, 25 percent of the Native American children in the care of public programs on the reporting date had been in care less than six months. Another 16 percent had been in care 6 to 11 months, 17 percent had been in care 12 to 23 months, and 35 percent had been in care two years or more (see Chapter 3, Table 3-7).

As a group, children in care of the public programs in the field study have been in care longer than the nationwide average. Of the 173 case records

Table 5-11

Elapsed Time Between Most Recent Case Review and Data Collection Date (open cases) or Date of Case Closing (closed cases) for Native American Children in Public Child Welfare Programs

Elapsed Time	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A (N=19)	Program B (N=22)	Program C (N=11)	Program A (N=12)	Program B (N=12)	Program C (N=12)	Program A (N=16)	Program B (N=11)	Program C (N=13)	Program A (N=14)	Program B (N=18)	Program C (N=13)
	%	%	%	%	%	%	%	%	%	%	%	%
Less than 1 Month	42.1	18.2	27.3	16.7	25.0	8.3	18.8	36.4	0	7.1	22.2	0
1 to 2 Months	26.3	36.4	27.3	25.0	25.0	41.7	18.8	18.2	7.7	28.6	27.8	7.7
3 to 5 Months	10.5	13.6	9.1	8.3	33.3	25.0	6.3	9.1	38.5	28.6	33.3	7.7
6 to 11 Months	0	9.1	0	8.3	8.3	16.7	18.8	9.1	23.1	0	11.1	0
12 Months or More	5.3	0	0	8.3	0	0	0	0	0	0	5.6	7.7
Unable to Determine	15.8	22.7	36.4	33.3	8.3	8.3	37.5	27.3	30.8	35.7	0	76.9
Average (in months)	2.8	2.5	1.8	9.9	3.0	3.5	3.0	2.2	5.4	2.7	3.8	9.7

(Overall average: 3.7 months)

reviewed at public programs during the field study, 91 were for children in care on the day of data collection. Length of time in care could be determined for all but one. Among these 90 open cases, 16 percent had been open for less than six months, 22 percent had been open 6 to 11 months and 18 percent had been open for 12 to 23 months. Across the 12 programs, 44 percent of the children had been in substitute care two years or more and the average length of time in care was 38 months.

As indicated by the upper half of Table 5-12, the distribution of open cases by length of time in care varies greatly among the 12 programs. The proportion of children who have been in care less than six months ranges from none to 38 percent. The percentage in care for 6 to 11 months is as high as 71 percent in one program, while the proportion in care between 12 and 23 months does not exceed one-third at any site. Children who have been in care two years or more represent from 17 to 83 percent of the open cases at each site. The average time in care ranges from 18 to 78 months. (The disproportionately high average time in care for one Minnesota agency's cases is influenced by three cases under tribal or joint State-Tribe jurisdiction that have been very long-term placements.)

We also examined the records of 82 cases that had been closed prior to our site visit to determine how long the children had been in care before being discharged. Six case records did not provide sufficient information to calculate time in care. For the other 76 cases, the average time in care had been 26 months. Overall, 26 percent were in care for less than six months, another 26 percent were in care 6 to 11 months, 16 percent were discharged after 12 to 23 months, and 32 percent were in substitute care two years or more.

The bottom half of Table 5-12 shows that the 12 public programs differ in the length of time children were in care before being discharged. The proportion discharged within the first six months ranges from none to 56 percent, the percentage closed after 6 to 11 months in care extends from none to 67 percent, while the percentage in care between 12 and 23 months is as high as 40 percent. Between 17 and 67 percent of closed cases at each site had been open for two years or more. The average time in care ranged from just over one year (13 months) to just under five years (58 months).

The reader will note that the average length of time in care for closed cases is shorter than that for open cases at 10 of the 12 programs. This is not an unusual finding among child welfare cases. It occurs because cases that have been closed are more likely to be those in which family reunification or other permanent arrangements were more easily attainable, and which thus could be closed more quickly, while those that remain open tend to be those in which a resolution is more difficult and takes longer to achieve. The overall distribution of case goals for open and closed cases at the 12 programs supports this explanation. Among closed cases, 82 percent had a goal of family reunification or relative placement, while 10 percent had a goal of long-term care or emancipation. In contrast, 48 percent of the open cases had return home or placement with relative as the goal and 20 percent had a goal of long-term care or emancipation.

Table 5-12

Length of Time in Substitute Care for Native American Children in Public Child Welfare Programs

Time in Care	Arizona			Minnesota			Oklahoma			South Dakota		
	Program A	Program B	Program C	Program A	Program B	Program C	Program A	Program B	Program C	Program A	Program B	Program C
Open Cases												
	(N=9)	(N=15)	(N=6)	(N=6)	(N=6)	(N=6)	(N=8)	(N=6)	(N=7)	(N=7)	(N=9)	(N=6)
	%	%	%	%	%	%	%	%	%	%	%	%
Less than 6 Months	22.2	20.0	0	0	16.7	33.3	37.5	0	0	14.3	11.1	16.7
6 to 11 Months	11.1	13.3	16.7	0	50.0	0	12.5	16.7	71.4	28.6	11.1	50.0
12 to 23 Months	33.3	13.3	0	33.3	16.7	16.7	25.0	33.3	0	0	33.3	0
24 to 35 Months	22.2	13.3	50.0	0	0	33.3	12.5	33.3	14.3	42.9	22.2	16.7
36 to 59 Months	11.1	13.3	16.7	16.7	0	0	0	16.7	0	0	11.1	0
60 Months or Longer	0	20.0	16.7	50.0	16.7	16.7	12.5	0	14.3	14.3	11.1	16.7
Unable to Determine	0	6.7	0	0	0	0	0	0	0	0	0	0
Average (in months)	18.2	57.4	38.8	78.3	27.5	44.2	25.4	23.7	24.1	37.9	42.7	28.3
(Overall average: 38 months)												
Closed Cases												
	(N=10)	(N=7)	(N=5)	(N=6)	(N=6)	(N=6)	(N=8)	(N=5)	(N=6)	(N=7)	(N=9)	(N=7)
	%	%	%	%	%	%	%	%	%	%	%	%
Less than 6 Months	20.0	42.9	40.0	0	33.3	0	25.0	20.0	16.7	0	55.6	28.6
6 to 11 Months	10.0	28.6	20.0	66.7	0	16.7	12.5	20.0	50.0	57.1	0	28.6
12 to 23 Months	20.0	0	0	16.7	0	16.7	25.0	40.0	16.7	14.3	22.2	0
24 to 35 Months	10.0	0	20.0	0	16.7	16.7	0	0	0	0	11.1	14.3
36 to 59 Months	20.0	0	20.0	0	33.3	16.7	12.5	20.0	16.7	14.3	0	14.3
60 Months or Longer	0	28.6	0	16.7	16.7	16.7	0	0	0	14.3	11.1	0
Unable to Determine	20.0	0	0	0	0	16.7	25.0	0	0	0	0	14.3
Average (in months)	21.8	29.5	16.8	35.2	58.3	39.6	18.4	15.8	12.8	23.3	23.0	17.7
(Overall average: 26 months)												

We are interested not only in how long children remain in substitute care, but also in the number of different substitute care settings in which they reside before being discharged. Of the 173 public program case records we reviewed, 169 provided sufficient data to make this determination. Among these children, 39 percent had been in the same setting since the start of this substitute care episode, 31 percent had lived in two settings, 12 percent had had three placements, and 18 percent had been in four or more. The average for all children is 2.5 settings--2.5 for open cases, 2.4 for closed cases--and the site-by-site average ranges from 1.7 to 3.8 placements.

7. What are the outcomes for Indian children who leave public substitute care? For what proportion of children who are adopted are adoption subsidies provided?

Findings from the mail survey reveal that nearly 78 percent of Indian children discharged from public programs nationwide during program year 1985-86 were discharged to a family setting. Of discharged children, 64 percent were returned to their own homes, 8 percent were placed with relatives, and 5 percent were adopted (see Chapter 3, Table 3-17). Three percent of discharges occurred because the child had reached the age of majority and had been emancipated, and one percent resulted from the child's being transferred to another agency.

At the field study sites, 82 of the cases reviewed were for children who had been discharged from substitute care. Compared to all public programs nationwide, the percentages of children discharged to relatives and adoptive families were higher: 15 and 11 percent, respectively. At 43 percent, however, the proportion returned to their own homes was markedly lower. Overall, family-based permanency was achieved for 68 percent of the children discharged from the field study programs. The proportions of children who were emancipated or transferred to another agency were 16 and 13 percent, respectively--markedly higher for this sample than for public programs nationwide.

There is wide variation among the field study programs with respect to the outcomes for children in their care. As shown in Table 5-13, the percentage of discharged children returned to their own homes ranges from 0 to 80 percent. Family-based permanency--reunification, placement with a non-parent relative, or adoption--was the outcome for between 33 and 100 percent of discharged children. At least two-thirds of the children were discharged to family settings at seven of the programs, while at three programs, fewer than half of the closed cases had this outcome. The case records reviewed involved one emancipated child at each of six programs, two at a seventh program and three at an eighth. Six programs discharged from one to four children each to other agencies.

In the nationwide mail survey (Table 3-19), public programs reported a total of 31 adoptions finalized during the reporting year that were receiving adoption subsidies. In the field study, all uses of adoption subsidies that were reported in case records occurred in Minnesota and South Dakota.

Table 5-13

Outcomes for Native American Children Discharged from Substitute Care in Public Child Welfare Programs

	Arizona			Minnesota			Oklahoma			South Dakota		
Outcome	Program A (N=10)	Program B (N= 7)	Program C (N= 5)	Program A (N= 6)	Program B (N= 6)	Program C (N= 6)	Program A (N= 8)	Program B (N= 5)	Program C (N= 6)	Program A (N= 7)	Program B (N= 9)	Program C (N= 7)
	%	%	%	%	%	%	%	%	%	%	%	%
Returned Home	20.0	28.6	40.0	66.7	33.3	16.7	50.0	80.0	0	57.1	77.8	42.9
Placed with Relative	10.0	14.3	20.0	16.7	0	16.7	25.0	0	16.7	28.6	11.1	14.3
Adopted	10.0	0	0	16.7	33.3	16.7	0	20.0	16.7	0	0	28.6
Emancipated	20.0	14.3	0	0	16.7	50.0	0	0	16.7	14.3	11.1	14.3
Ran Away	0	14.3	0	0	0	0	0	0	0	0	0	0
Discharged to Another Agency	40.0	28.6	40.0	0	16.7	0	12.5	0	50.0	0	0	0
Unable to Determine	0	0	0	0	0	0	12.5	0	0	0	0	0

Nine of the children discharged from public programs in the field study were adopted, and case records indicated that four of the nine adoptions were being subsidized. Three of the four were receiving Minnesota State subsidies. The source of the fourth subsidy, in South Dakota, could not be determined from the case record. One subsidy each was made on the grounds of a handicapping condition, a physical condition requiring long-term medical assistance, and minority (i.e., American Indian) status. Grounds for the fourth subsidy were both minority status and chronic medical assistance needs.

At the time the case records were reviewed, 16 of the 91 children still in substitute care had a case goal of adoption. The records indicated that subsidies were being considered for six of these cases, two in Minnesota and four in South Dakota. Minority or Indian identity comprised the grounds for two subsidies, and Indian status and belonging to a hard-to-place sibling group were grounds for a third. Grounds for the other three could not be determined. It is possible that subsidies would be considered for some of the remaining ten children with a goal of adoption as progress is made toward that goal.

Chapter 6

Tribal Child Welfare Services

With perhaps a few exceptions, there were no tribal programs for child welfare until the mid-1960s, when the Federal government began making funds available for a variety of tribally run programs. Even then, needs such as economic development were given a higher priority by most tribes.

For those tribes who wanted to establish their own child welfare programs, lack of funds was a major impediment. The two primary funding sources were contracts with the BIA, especially under the Indian Self- Determination Act, and contracts with States to operate programs with Title XX funds. However, the amount of funds provided to the BIA for tribal contracts was very limited. For Fiscal Year 1976, for example, the appropriation "for all tribes for all BIA programs areas, including education, law and order, resource management, and economic development" was only $10.7 million (DHEW, 1978, p.11).

Contracts with States for Title XX funds also were problematic. States were reluctant to enter into such contracts with tribes because of the possibility that the State could not sue a tribe to recover contract funds if there were an audit exception. Tribes also were reluctant to enter contracting arrangements because of the control the State then would have over tribal activities.

Finally, of course, Public Law 280 and subsequent State laws had abrogated the rights of many tribes to govern themselves in child welfare and other civil and criminal areas. These tribes might provide services analogous to those of a private agency, but State law, State licensing requirements, and the jurisdiction of State courts all would apply.

Upon passage of the Indian Self-Determination and Education Assistance Act of 1975, monies that had been designated for use by BIA agencies in providing services to tribes began to be shifted to the tribes themselves. Among the funds being conveyed to tribal programs were those supporting child welfare services. As these funds were made available to tribes, the prevalence of tribal child welfare programs increased.

The Indian Child Welfare Act of 1980 contains three provisions that have direct implications for tribal child welfare programs. The first is the affirmation of tribal jurisdiction over child custody proceedings involving tribal children residing or domiciled within the tribe's reservation or trust lands. The second is the stipulation that jurisdiction over custody proceedings involving an off-reservation child shall be transferred from State to tribal jurisdiction upon petition by the child's Indian parent or tribe. These two provisions mean that tribes have both the right and the responsibility to establish and operate child welfare programs that can address the needs of children and families experiencing disruption. The third provision of the Act that affects tribal programs is Title II, which authorizes grants to tribal (and off-reservation) child and family service programs.

Tribal child welfare programs vary widely in terms of the services they provide, the number of clients they serve, and the structure of their delivery systems. They can be thought of as falling along a continuum that ranges from highly developed and comprehensive programs at one end to basic and relatively undeveloped programs at the other.

The highly developed programs usually are found in large tribes and are positioned within the tribal government structure under a Department of Social Services. These programs provide a variety of direct services, often including crisis intervention, parent education, child protective services, foster and group home care, shelter care, and family violence programs. They have linkages with programs such as the Indian Health Service and may interact with tribally operated Head Start, day care, employment, and Special Food Supplement for Women, Infants and Children (WIC) programs. They have established relationships with the tribal court system for legal decisions and actions.

These comprehensive programs usually are staffed by 8 to 13 people, including MSW and/or BSW social workers and case aides or other paraprofessionals who work directly with families. Staff have differentiated responsibilities in positions such as family services, protective services, and foster care. These programs are similar to those operated by State or county agencies.

Falling midway on the continuum of tribal child welfare programs are those providing more limited services with two to three staff members. Depending on the tribal structure, they may operate with a Department of Social Services or under the office of the Business Executive. These mid-level programs generally provide family counseling and child protective services. As they increase in size, the programs add services such as foster care, shelter care, and parent education programs.

In the least developed tribal programs, a single child welfare coordinator operating under the tribal Business Executive performs the entire range of services from court work to family counseling. General social services to families are delivered directly, and referrals are made for many other services. These programs generally are supported on a year-to-year basis by grant funds. If they are not refunded, services are stopped or are maintained at a minimal level, sometimes by a staff member who works without pay.

For the field study, eight tribal child welfare programs were visited in four states. Information about these sites, including census data on the reservation populations for six of the eight tribes, is provided in Chapter 4. Also in that chapter are data on the number of interviews and case record reviews conducted at each site, and on the characteristics of children whose substitute care case records were reviewed.

Organization of the Chapter

In this chapter, we present information from the Indian Child Welfare Study about tribally operated child welfare programs. Findings are reported in four sections. The first describes how various tribal offices interact in regard to child welfare-related matters. The second addresses more specific issues related to child welfare service delivery. The third reports findings related to selected substitute care casework practices. The fourth discusses current and projected needs of tribal programs.

Listed below are the specific research questions addressed in each of the four sections. A summary of chapter findings is provided following the list of questions. The detailed presentation of findings follows the summary.

A. Tribal Organization for Child Welfare

1. What are the sources and amounts of funding for tribal child welfare services? For what does each funding source pay?

2. What are the roles of and relationships among the tribal council, tribal court, tribal leader and tribal child welfare program with respect to child welfare?

3. Are tribal and CFR court judges who hear child welfare cases paid or volunteer? Full-time or part-time? Lay or professional? Approximately how many child welfare cases do they handle each month? What types of training have they had on the Indian Child Welfare Act?

4. When a tribe that operates its own child welfare program is notified that one of its children is involved in custody proceedings in a State court, who decides whether the tribe will accept or decline jurisdiction over the case? What are the criteria or reasons for accepting or declining jurisdiction? How frequently do tribes decline jurisdiction?

5. What has been the impact of implementation of the Indian Child Welfare Act on tribes, tribal programs, parents, and children?

B. Staffing and Services of Tribal Child Welfare Programs

1. What are the staff characteristics of tribal child welfare caseworkers? How large are their caseloads? Where do they turn for training and technical assistance on child welfare issues? What efforts do they make to recruit Indian students for social work education or training?

2. How do tribal child welfare programs handle child abuse and neglect reports for children living on the reservation? What is their role when they or nearby public agencies receive such reports for children living off of the reservation?

3. What services are provided by tribal child welfare programs for families with children in substitute care? For what services do the programs make referrals? What services do program clients use most often?

4. Do tribal programs have written standards for foster families? What is the experience of tribal programs with regard to recruiting and approving Indian foster families? Are tribal foster homes paid the same rate as homes used by public programs?

5. How do tribal leaders evaluate the tribal child welfare programs? What do local public child welfare administrators regard as the strengths and weaknesses of the tribal programs with which they work?

C. Substitute Care Casework Practices

1. What efforts do tribal child welfare programs make to prevent placing children in substitute care?

2. When children must be placed in substitute care, into what types of settings are they placed?

3. What goals for permanency are established for children in out-of-home care?

4. What proportion of children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

5. By whom and how often are cases reviewed?

6. How long do children in the care of tribal child welfare programs remain in substitute care? How many different placements do they have while in care?

7. What are the outcomes for children who leave tribal substitute care? For what proportion of children who are adopted are adoption subsidies provided?

D. Program Needs

1. What problems have tribes experienced in developing the capabilities to provide child welfare services for children and families?

2. In addition to those services already being provided or referred, what other child welfare-related services do clients of tribal child welfare programs need? What needs do tribal officials project for tribal child welfare programs over the next two years?

3. What modifications do tribal officials suggest to increase the effectiveness of Federal assistance to tribal child welfare programs?

Summary of Findings

This chapter describes key aspects of the organization and operation of eight tribal child welfare programs. It also discusses many of the issues confronting tribes as they strive to operate high-quality programs and participate as full partners in a coordinated Federal-State-Tribal service delivery system. Following is a summary of chapter findings.

A. Tribal Organization for Child Welfare

Funding for Child Welfare Services

The two largest funding sources for tribal child welfare services are monies transferred to tribes under "638" contracts with the Bureau of Indian Affairs (BIA), and Title II grants established by the ICWA. The "638" funds pay for substitute care placements and are used most heavily in areas where the States have not provided services to Indians. Title II grants, awarded by the BIA on a competitive basis, support the development and operation of child and family service programs. These two sources provided substantial support to six of the eight tribes in our field study during Fiscal Year 1987. Title IV-E funds are made available to four of the tribes in three states. In the absence of Federal funds, Minnesota has allocated State funds to support tribal programs. The uncertainty of Title II and other grant funds makes the search for funding an ongoing process in several of the tribal programs visited.

Roles and Relationships of Tribal Offices in Child Welfare Matters

In most tribes, the role of the tribal council is analogous to that of a State legislature because the council sets priorities and allocates funds among various tribal efforts, including child welfare programs. The tribal leader, like a Governor, plays a more or less active role in deliberations of the council. Generally, the councils and leaders of the tribes visited have supported the child welfare program, although some respondents mentioned political pressures that interfere with casework practice. In the seven field study tribes that are eligible to accept jurisdiction over child custody cases, the tribal court removes a child from parental custody upon petition by the tribal child welfare program, just as is done in the public sector.

Role and Training of Tribal Judges in ICWA

In each of the seven courts serving tribes that can accept jurisdiction, between two and four judges (more of whom are full-time than part-time) hear child welfare cases. Estimates of the number of cases handled each month by the eight judges interviewed range from 4 to 60 and average 23. Six of the eight judges have received training on the ICWA, most often from the National Indian Justice Center.

Accepting or Declining Jurisdiction

The most frequently cited reasons for declining jurisdiction over child welfare cases included another tribe's being the more appropriate custodian, the child's lack of ties to the tribe or Indian culture, lack of tribal resources to meet the child's special needs, and the child's ineligibility for tribal enrollment. Among the six programs providing the information, five tribes declined jurisdiction in between 72 and 90 percent of the cases for which notifications had been received in the past two years. The sixth tribe had declined jurisdiction in 20 percent of the cases.

Of the 173 case records reviewed in public programs, 22 were for children from the 7 field study tribes that can assume jurisdiction. The records showed that the child's tribe had been notified in 18 of the 22 cases, had assumed jurisdiction in 4, and had declined jurisdiction in 9, for reasons somewhat similar to those cited by respondents.

Impact of the ICWA on Tribes, Their Programs and Their Members

The overall impact of the ICWA on the tribes has been positive, particularly in its affirmation of tribal sovereignty over Indian children and its preventing the tribes' loss of children. Other benefits cited by tribal respondents focus on the development of tribal child welfare programs and tribal courts to handle child welfare matters, more specifically: the establishment of legal safeguards and codes for children in protective custody; improved services for Indian children and families; increased credibility of tribal programs and courts; and cooperative relationships with public programs and courts.

For Indian parents, the law provides legal recourse to prevent permanent loss of their children. Tribal court decisions take into account Indian cultural perspectives and parents may turn to tribal child welfare programs in time of need. For children, placement more frequently occurs with extended family or other tribal members because of the Act, reducing the trauma of separation while promoting family and tribal identification.

B. Staffing and Services of Tribal Child Welfare Programs

Staff Characteristics and Caseloads

The number of child welfare workers in the 8 tribal programs ranges from 1 to 11. Except for the two Arizona programs that include white and Hispanic caseworkers, the staff are all Native American.

Four of the programs have at least one MSW and, in five programs, at least half of the staff have a Bachelor's or Master's degree in social work. Staff qualifications are believed by tribal officials to have an important effect on the programs, not only because of the need for professional judgement in protective service cases, but also because of the enhanced credibility that accrues among clients, the tribe, and other professionals and agencies in the field.

The reported average caseloads for child welfare caseworkers at each program range from 10 to 42 children, with an 8-program average of 27. The average number of children receiving services is 63, with an average of 33 children being in out-of-home placements.

Services Provided and Referred

Tribal programs typically provide caseworker counseling, parenting classes and transportation. Family counseling and parent, teen, or adult support groups are offered by five programs. Referrals are made for most other social services.

Response to Child Abuse and Neglect Reports

The tribal programs respond to abuse and neglect reports within their jurisdictions in the same way as public agencies, except in Fond du Lac, where the State has jurisdiction, and at Rosebud, where by agreement the State handles the reports.

Foster Homes

All eight tribes have written standards for foster families, usually based on the State standards. Recruitment of foster families has not been a problem in 3 programs, which approved 28 percent of 102 applications received from potential foster families in the past 2 years. However, recruitment has posed difficulties in 4 other programs, which accepted 74 percent of the 85 applications received in the past 2 years. Reasons for not accepting applicants are similar for both groups of programs: failure of families to follow through with the application process or to meet the standards for approval, and insufficient staff time to complete the necessary home studies and paperwork. Tribal foster homes are paid the same rates as foster homes used by public agencies in all eight sites.

C. Substitute Care Casework Practices

The practices discussed here represent generally accepted standards of good casework, as specified in P.L. 96-272, but are not legal requirements for tribal programs (unless the tribe has a formal contract or agreement with the State to provide certain placement services). Data are based on the 121 case records reviewed at the eight tribal programs. Of these cases, 83 percent were under tribal jurisdiction; the others were under State or undetermined jurisdiction.

- Of the 121 substitute care cases, 54 began under tribal jurisdiction. Of these cases, 37 percent (N=20) showed documentation of efforts to prevent the child's placement--almost always involving counseling by the caseworker.
- Thirty-one percent of the children were placed with relatives, while fifty-two percent were placed in non-relative foster homes. Of this latter group, 37 percent were in Indian homes. The mail survey shows fewer children in foster homes (69 percent) and more in group facilities (21 vs. 14 percent).
- Seventy percent of the children have a case goal that will place them in a permanent family setting (return home--46 percent; relative placement--9 percent; and adoption--15 percent). These

figures differ somewhat from the mail survey (50 percent, 14 percent and 6 percent, respectively) although the total percentage is the same. The programs vary considerably in the distribution of children across case goals.

- o Written case plans were present in 65 percent of the records. The low proportions of case plans signed by parents that were found in the children's records suggest that this is not routine practice.

- o Voluntary placements comprised 25 percent of the cases. The majority of these (63 percent) included a written agreement with the parent.

- o Among the 79 case records (65 percent) with information on the last administrative or judicial review, most (81 percent) had been reviewed within six months of the time of the site visit (for open cases) or the date the child left care (for closed cases). The programs show large variations in average elapsed time since the last review--from 1.5 to 8.7 months.

- o Length of time in tribal care for open and closed cases appears below and is compared to data from the mail survey.

	Mail Survey (Open Cases) (N = 2,089)	Field Study Open Cases (N = 57)	Field Study Closed Cases (N = 55)
Less than 6 months	26%	9%	35%
6-11 months	21%	19%	24%
12-23 months	19%	32%	16%
2 years or more	28%	40%	25%

Total time in care was actually longer for children whose cases were transferred from State to tribal jurisdiction (42 percent of the open cases and 37 percent of the closed cases).

- o Average length of time in care for closed cases is shorter than that for open cases, as was seen for children in public care. This is because goals of reunification or relative placement, which are more easily achieved, are more prevalent among closed than open cases (75 vs. 34 percent).

- o The average number of different substitute care settings for 112 of the children while in tribal care is 2.0.

- o Outcomes for the 60 children discharged from care show family-based permanency for 88 percent of the child (returned home--54 percent; placed with relative--15 percent; adopted--19 percent). This compares favorably to the 83 percent of children discharged to a family setting from tribal programs nationally (55 percent, 19 percent and 9 percent, respectively).

- Individual programs show very diverse patterns with respect to outcomes for discharged care. At one program, all closed cases had reunification as the outcome, while in two other programs fewer than 50 percent were discharged to their families. Three programs had no adoptions, while in one, adoptions represented 44 percent of closed cases. Differences in the population, in tribal philosophy regarding adoptions, and in caseworker practices appear to be among the factors at work here.

- Use of adoption subsidies was reported in only 1 of the 11 adoption case sampled in the field study, and in 91 of the 163 adoptions finalized by tribal programs during the reporting year in the mail survey.

D. Program Needs

Problems Experienced by the Tribes in Developing Child Welfare Service Capabilities

Inadequate funding for child welfare services and related tribal court operations and the instability of Title II and other grant resources rank as the foremost problems in building tribal capacitities in child welfare. These problems limit the type and continuity of services that can be delivered; cause tribes to decline jurisdiction over cases; produce erratic shifts in the number and expertise of child welfare staff; divert staff time to an ongoing search for grant money; and lastly, generate loss of confidence among tribal council members who wonder why the program cannot retain Federal grants.

Strengths and Weaknesses of the Tribal Child Welfare Programs

Tribal leaders were positive about the quality of tribal child welfare services, "especially considering the funding levels." Particular features of the programs and related tribal activities that were noted include staff effectiveness in direct case work; preventing removal; training and counseling for high-risk parents; passage of tribal ordinances regarding sexual abuse; and defining the role of the program and the court.

Public program administrators provided assessments of tribal programs. Among the strengths cited were cultural sensitivity; success in arranging relative placements; high-quality staff; effectiveness of advocacy efforts; and the quality of tribal court reviews. Weaknesses of tribal programs relate to lack of staff; inadequate training of workers, high staff turnover; and insufficient or intermittent funding, which public program officials perceive as the primary cause for the aforementioned difficulties, as well as such problems as the tribe's inability to provide foster care placements during the latter part of each funding year.

One concern identified by several public administrators is the impact of tribal politics on child welfare services. At some sites, tribal officials put pressure on tribal child welfare workers or tribal court judges to influence the handling of certain cases.

Needs of Tribal Programs in the Next Two Years

Tribal program administrators identified several areas of need to improve their ability to work with families at risk of or already in substitute care. Preventive and early intervention services are needed, such as family-based services, mental health and substance abuse services, day care, and youth/adolescent services. Strengthening programmatic capabilities in handling child welfare matters is a critical need, so that 24-hour crisis intervention, emergency shelters, youth homes, and other facilities are available through the tribe and community resources. In addition to increased numbers of professional and support staff, administrators believe that staff would benefit from training and technical assistance in such areas as preventive and protective services and communication skills and the development of procedural manuals. Other needs relate to the tribal court (for example, expansion to handle more juvenile cases and development of a children's code), as well as to broader issues (long-range planning to allow for orderly acquisition of contract services and more use of private funding sources).

Modifications Suggested to Increase the Effectiveness of Federal Assistance

The majority of respondents' comments about improving Federal assistance to their child welfare programs focused on the Title II grants that are authorized under the ICWA and awarded by the BIA. Many noted the need for increased funds. In addition, respondents made these suggestions about Title II funding:

- Award grants on a non-competitive basis. Whether or not that can be done, provide minimum standards for service that applicants must meet and institute a more systematic and objective approach to the review and rating process.

- Consult with the tribes to set priorities for program areas instead of deciding priorities at the central office.

- Modify the short time frame for submission of applications, reduce the paperwork required and notify applicants promptly to eliminate delays that hamper program planning efforts.

- Provide incentive funding for outstanding child welfare programs.

With respect to "638 contracts," respondents suggested that more reliable budget planning figures need to be provided and the dollar limit for foster care should be removed. Title IV-E documentation procedures are very burdensome and there should be a reduction in the paperwork ("almost a book") required for each child, according to other respondents. And finally, some administrators feel there should be increased training and technical assistance to help tribes implement the ICWA.

Detailed Discussion of Findings

In the remaining pages of this chapter, the findings just summarized are presented in greater detail. The organization of the detailed discussion corresponds to that of the summary and addresses the specific questions listed on pages 3 and 4.

A. Tribal Organization for Child Welfare

The first set of findings describe the operating context of tribal child welfare programs. Topics include program funding, the relationships among various tribal offices in matters related to child welfare, and the impact of the Indian Child Welfare Act on tribes, tribal programs, and tribe members.

1. What are the sources and amounts of funding for tribal child welfare services? For what does each funding source pay?

Tribal child welfare programs receive funds from a variety of sources. With these funds, each tribe has the challenge of developing an integrated and comprehensive program of services. Tribes also must attempt to develop and maintain continuity of services with funds that may or may not be renewed each year. Except for "638" funds for child welfare assistance, tribal programs do not have the relatively stable sources of funds that are available to public agencies year after year through the Social Security Act.

The two largest funding sources for tribal child welfare programs are Child Welfare Assistance monies transferred to tribes under "638" contracts with the Bureau of Indian Affairs, and Title II funds established by the Indian Child Welfare Act. The three Federal sources providing the greatest amount of funds for public child welfare programs--Title IV-E, Title IV-B, and Title XX--represent relatively minor resources for tribes. These funding sources as they relate to tribal child welfare programs are described below.

Snyder Act Funds through 638 Contracts

As explained in Chapter 1, States are responsible for the provision of child welfare services to all children and families, including Indians. Historically, however, some States did not meet their obligations where the Indian population is concerned. The Bureau of Indian Affairs (BIA) therefore was assigned responsibility for providing child welfare and other services where State assistance was not accessible.

The Snyder Act of 1921 (Public Law 67-85) authorizes two types of funds used by BIA Agency social services staff for child welfare-related activities. These funds have been used most heavily where States have not served Indian children. Child Welfare Assistance (CWA or "2263") funds cover the cost of care for Indian children in foster homes or non-medical residential centers.

Administrative ("2266") funds pay for salaries, facilities, and other operating expenses of the social services program, including the child welfare component.

Under the Indian Self-Determination and Education Assistance Act of 1975 (Public Law 93-638), the Bureau can contract with qualifying tribes to transfer responsibility and some funding for various service programs to the tribes. Child welfare is one of the programs that can be contracted. Thus, the BIA and a tribe can negotiate a "638" contract for child welfare that conveys some portion of the Bureau's CWA funds and Administrative funds to the tribe. BIA "638" contracts represent the largest source of funds for tribal programs.

Title II or ICWA Funds

The second largest source of monies for tribal child welfare programs is the grant program initiated in 1980 under Title II of the Indian Child Welfare Act. Title II grants are available to tribes and off-reservation Indian centers to support establishment and operation of Indian child and family service programs and preparation and implementation of child welfare codes. Grants are awarded on a competitive basis; thus, applying tribes and off-reservation Indian programs compete against each other for the limited amount of funds.

The objective of programs funded by Title II is to prevent the breakup of Indian families and ensure that the permanent removal of an Indian child from his or her Indian parent is done only as a last resort. The Act gives several examples of what such programs may include: foster and adoptive home regulation; family counseling and treatment facilities; temporary substitute care facilities; family assistance services; home improvement programs; employment, education and training of certain types of child welfare-related personnel; and provision of adoption subsidies.

The Title II grant program is administered by the BIA. Title II grant awards in Fiscal Year 1980 totaled $5.4 million. The following year they rose to $9.3 million, the highest total to date in the program's 8-year history. After hovering near this level, total awards dropped to $8 million in Fiscal Year 1984. For Fiscal Year 1987, the total was $8.8 million. Over the 8 years, awards to individual tribes have ranged from $8,600 to $237,000 and average $55,000. Table 6-1 provides a year-by-year summary of Title II funding.

Both Central and Area Offices of the BIA play a role in decisions about the disbursement of Title II funds. The Bureau's Central Office allocates annual grant funds among its 12 Area Offices. Each Area Office evaluates applications from tribes and off-reservation Indian programs in its area and allocates its funds according to various criteria among those whose applications are evaluated favorably. An area-by-area summary of Title II funding is presented in Table 6-2.

From its inception in Fiscal Year 1980 through Fiscal Year 1985, all Title II grants were awarded for one year. To receive funds the following year, a tribe re-competed for a new award which it might or might not receive. Many tribes experienced the predicament of having Title II funds one year, not

Table 6-1

Summary of Title II Grant Awards by Fiscal Year

Fiscal Year	Applications Received: Total Number Received	Applications Received: Percent Approved	Applications Received: Percent Disapproved	Grants Awarded: Total Number Awarded	Grants Awarded: Percent to Tribes	Grants Awarded: Percent to Off-Reservation Centers	Total Funds Requested by Approved Applicants	Total Funds Awarded	Average Grant
1980	249	63.9	36.1	159	(1)	(1)	$11,124,693	$5,471,547	$34,412
1981	273	68.9	31.1	188	(1)	(1)	18,910,395	9,329,395	49,624
1982	257	63.8	36.2	164	(1)	(1)	14,764,504	9,312,692	56,785
1983	217	70.0	30.0	152	(1)	(1)	12,215,768	9,302,886	61,203
1984	227	67.8	32.2	154	(1)	(1)	12,804,562	8,089,543	52,530
1985	213	73.7	26.3	154	73.9	26.1	12,717,753	8,167,321	53,035
1986	244	44.3	55.7	108	82.4	17.6	8,620,734	8,035,363	74,402
1987	197	65.0	35.0	128	75.8	24.2	9,663,446	8,799,504	68,746
TOTALS	1,877	64.5	35.5	1,207	76.9	23.1	100,821,855	66,508,251	55,102

Source: Compiled from data provided by the Division of Social Services, Bureau of Indian Affairs, U.S. Department of the Interior.

(1) These data are available for Fiscal Years 1985-1987 only.

Table 6-2

Summary of Title II Grant Awards by BIA Area
(Fiscal Years 1980-1987)

BIA Area	Applications Received: Total Number Received	Applications Received: Percent Approved	Applications Received: Percent Disapproved	Grants Awarded: Total Number Awarded	Grants Awarded: Percent to Tribes (1)	Grants Awarded: Percent to Off-Reservation Centers (1)	Total Funds Requested by Approved Applicants	Total Funds Awarded	Average Grant
Aberdeen	138	63.8	36.2	88	78.6	21.4	$ 8,895,060	$ 4,589,168	$ 52,150
Albuquerque	138	34.8	65.2	47	63.6	36.4	3,523,773	3,277,771	69,740
Anadarko	154	85.7	14.3	132	87.2	12.8	7,524,000	5,186,431	39,291
Billings	87	60.9	39.1	52	63.2	36.8	3,882,239	2,446,433	47,047
Eastern	144	58.3	41.7	84	69.2	30.8	7,470,928	4,757,258	56,634
Juneau	156	53.2	46.8	80	58.3	41.7	9,761,901	8,117,729	101,472
Minneapolis	300	74.0	26.0	222	71.9	28.1	13,847,744	7,492,652	33,751
Muskogee	85	71.8	28.2	61	54.5	45.5	7,542,463	4,604,584	75,485
Navajo	12	75.0	25.0	9	33.3	66.7	4,490,643	1,361,651	151,295
Phoenix	223	69.5	30.5	155	94.6	5.4	7,990,860	5,648,104	36,439
Portland	294	64.3	35.7	189	86.5	13.5	13,201,361	9,261,810	49,004
Sacramento	148	58.8	41.2	87	60.0	40.0	12,816,905	9,920,937	114,034

Source: Compiled from data provided by the Division of Social Services, Bureau of Indian Affairs, U.S. Department of the Interior.

(1) These percentages represent awards for Fiscal Years 1985-1987 only.

having them the next year, then being re-funded the following year. In the interim year, services had been cut back or eliminated, staff had left for other positions, case records had been transferred elsewhere or destroyed to protect confidentiality, and the facilities had been put to other uses. Upon re-funding, the tribes have to recruit new staff and otherwise begin the program anew.

In recognition of the extent to which year-by-year funding undermined service quality and continuity, a policy permitting multi-year awards was initiated in FY 1986. Of that year's grantees, 59 percent received multi-year awards, and 95 percent of those multi-year awards were renewed in FY 1987.

Title IV-B

Title IV-B of the Social Security Act, as amended by the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272), is administered by the U.S. Department of Health and Human Services (DHHS). It provides funds for child welfare services designed to prevent family breakup and promote family reunification. As stated earlier, it is a major Federal funding source for public child welfare programs but a relatively minor resource for tribal programs.

There are two ways--one direct, the other indirect--that Indian tribes can receive funds under Title IV-B. Section 423 of Title IV-B authorizes funds for child welfare services to be paid to States meeting certain requirements. It is possible for States in turn to channel some of these funds to tribes. This was done in Minnesota, for example, until 1986. The second mechanism, authorized in Section 428, provides that in "appropriate cases," payments to support child welfare services may be made to tribes directly.

Minnesota notwithstanding, distribution of IV-B funds to tribes by the States has been an infrequent occurrence. There are many reasons for this, including the possibility that tribal sovereignty could prevent States from taking any legal action to recover the funds should they not be used as planned.

To be eligible for direct IV-B funding, a tribe must already be delivering child welfare services under a 638 contract, described earlier. The rationale for this is that IV-B grants are too small to support initiation of a program, and should be used instead to extend existing services. Because the funds are so limited, many tribes have felt that it is not worth the time involved to apply for an award.

Direct IV-B funding of tribal programs has provided a total of about $2 million since Fiscal Year 1983, when the program began. About 43 percent of this has been awarded to one tribe--the Navajo--whose reservatian has almost nine times the Indian population of the second largest reservation in the country. The remaining IV-B funds have been awarded to a small number of tribes (e.g., 23 in Fiscal Year 1983, 36 in Fiscal Year 1985, 34 in Fiscal Year 1987). Excluding those to the Navajo, awards have ranged from $665 to almost $48,500 and average $7,000. A summary of Title IV-B funding is displayed in Table 6-3.

Table 6-3

Summary of Title IV-B Grant Awards to Tribes, Fiscal Years 1983 to 1987

	Fiscal Year				
	1983	1984	1985	1986	1987
Total Funds Awarded	$242,780	$396,512	$426,127	$403,401	$432,679
Number of Tribes Funded	23	35	36	31	34
Smallest Grant	$ 1,342	$ 665	$ 855	$ 1,219	$ 1,112
Largest Grant excluding Navajo Tribe[1]	10,887	48,365	48,465	48,182	48,182
Average Grant excluding Navajo Tribe[1]	3,714	6,955	7,581	8,087	8,034
Percent of Funded Tribes...					
Also Funded in Previous Year	0	65.7	77.8	96.8	85.3
Also Funded in Following Year	100.0	80.0	83.3	93.5	(2)
Funded in both Previous and Following Years	0	51.4	61.1	93.5	(2)

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[1] The Navajo Tribe, whose reservation covers parts of three states and has a total Indian population of approximately 105,000, has received between $160,000 and $168,000 in Title IV-B funds each year.

[2] Fiscal Year 1988 grants have not yet been awarded.

Source: Compiled from annual funding data provided by the Formula Grants Branch, Administration for Children, Youth and Families, U.S. Department of Health and Human Services.

Title IV-E

Title IV-E of the Social Security Act, which is established in Public Law 96-272, is the second of the three sources providing the bulk of Federal funding for public child welfare programs. IV-E funds pay for foster care maintenance for children whose families are eligible for Aid to Families with Dependent Children. A State and tribe can enter into an intergovernmental agreement, or "IV-E contract," under which the tribe has access to State IV-E funds to pay for tribally supervised substitute care placements of Indian children who meet the IV-E eligibility requirements.

Information on the prevalence of IV-E contracts is sketchy because they are developed at the State, rather than the Federal, level. The same issues that discourage States from contracting with tribes to transfer IV-B funds also inhibit widespread use of the IV-E contract mechanism.

Title XX

Title XX of the Social Security Act is the third major Federal funding source for public child welfare services. Title XX supports social services for a variety of goals, including the prevention of neglect, abuse and exploitation of children. Tribal governments are eligible for Title XX grants, but the grants must be matched on a 75/25 percent basis. Tribal grants can be matched by State funds, but States generally are reluctant to provide public tax dollars to match funds for programs on reservations, which are exempt from State taxes. Thus, to take advantage of Title XX monies, most tribes would have to provide the 25 percent match from their own resources. Given this situation, few tribes draw funds from Title XX.

Other Sources

In addition to the five Federal programs described above, there are a number of other resources used by various tribes to help support child welfare services. These include the DHHS Coordinated Discretionary Funds Program, which awards grants for special, innovative, or demonstration projects in a variety of social service areas; State funds, provided through contracts for specific child welfare-related activities such as an Indian foster parent recruitment and training program in Oklahoma; foundation and corporate grants for innovative or demonstration programs, including notable donations from Phillips 66 and several mining companies; and tribal funds--from sources such as oil, gas, coal and timber leases, gaming activities, and tribal businesses--which may be allotted to child welfare and related services, depending on the priority a tribal council places on these needs in relation to all the others confronting the tribe's members.

The funding patterns of the eight tribal child welfare programs visited for the field study component of this project reflect the experience of many tribes in tapping a variety of sources to support child welfare services. Table 6-4 displays each program's funding sources as reported by the tribe's child welfare program administrator. Six of the eight programs had 638 contracts with the BIA that ranged from $70,000 to $400,000 for program year 1986-87. Four had received Title II grants of between $50,000 and $149,000.

Table 6-4

1986-87 Funding for Tribal Child Welfare Programs

Funding Source	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A	Program B	Program A	Program B	Program A	Program B	Program A	Program B
BIA 638 Contract	$400,000	$200,000		$70,000			$284,000	
Title II Grant		50,000			$75,000	$65,000	149,000	Data not provided.
Title IV-B Direct Grant	15,000				10,000	5,600		
Title XX Grant	22,000							
Title IV-E through State Contract	60,000	27,600				96,000		
Other State Funds		35,000	$24,000	150,000		6,664		
Total	$497,000	$312,600	$24,000	$220,000	$85,000	$173,264	$433,000	

In addition to these primary funding sources, two tribes had IV-B grants, two used Title XX monies, four had IV-E contracts with their respective States, and four were receiving other State monies of various types.

2. **What are the roles of and relationships among the tribal council, tribal court, tribal leader and tribal child welfare program with respect to child welfare?**

Seven of the eight tribes visited for this study are eligible to accept jurisdiction over tribal children involved in custody proceedings. The eighth tribe, the Fond du Lac Band, falls under Public Law 280, which in certain states transfers jurisdiction over specified civil and/or criminal matters on Indian lands to the State. Minnesota is one of those "280 states," and 280 jurisdiction in Minnesota extends to Indian child custody matters. Thus, child custody questions relating to Fond du Lac children are resolved in State courts. While there has been controversy over the interpretation of the tribal constitution on this matter, the Fond du Lac tribal court usually has not heard child welfare cases. In this chapter, therefore, references to tribal court involvement in child welfare do not encompass Fond du Lac. The Red Lake Band, also in Minnesota, was exempted from the provisions of P.L. 280 and is one of the seven tribal study sites where the tribe can take jurisdiction of child welfare proceedings.

Six of these seven tribes have their own tribal courts. The seventh tribe--the Cheyenne & Arapaho Tribe of Oklahoma--does not have its own court, but instead is served by the Concho Code of Federal Regulations, or CFR, Court. A CFR Court is a BIA-operated court established upon tribal request to serve the tribe(s) in its area. Judges for a CFR Court are appointed by the Bureau with the concurrence of the tribe(s). In the discussion that follows, the Concho CFR Court is distinguished from the six tribal courts only when a difference between the two types of courts was observed.

In the sites visited for this study, the roles of and relationships between tribal courts and tribal child welfare programs are analogous to those of State courts and public programs. When tribal child welfare workers believe that a child needs to be removed from the home because of abuse, neglect, or other protective service reasons, the child welfare program seeks a court order for removal and the court issues a ruling. In emergency situations, the program's request and the court's ruling can be verbal, with follow-up paperwork completed on the next business day. If the ruling is to remove the child from the parents' custody, the child welfare program arranges a substitute care placement in accordance with the court's orders and provides case management and supervision. A child is returned home or placed in another permanent setting upon court order.

In most tribes, the formal role of tribal councils relative to child welfare is analogous to that of State legislatures (and county or city councils in states where child welfare is locally administered), because it is the councils who set priorities and allocate funds among various tribal efforts. The extent of a particular council's commitment to child welfare relative to other needs is reflected in budgets, facilities, policies, cooperation from other tribal offices, and other factors that support or impede effective delivery of services. Most of the tribal program administrators we interviewed said that their tribal councils had been supportive of the program. One, however, said that "They support it in election year. Some individuals are very knowledgeable and supportive, but for the majority, children aren't really an issue."

An exception to this relationship between the tribal council and the child welfare program is found in most pueblos. ("Pueblos" is the term that designates 19 of the tribal entities in New Mexico.) There, the tribal council sits in judgement as a court. Consequently, the council hears child welfare cases as well as other matters requiring adjudication between parties.

As with state governors and city mayors or managers, tribal leaders (most commonly designated chairperson, president, or chief) play varying roles in the deliberations of the councils. The situation in a particular tribe is influenced by factors such as that tribe's customs, the leader's own commitment to child welfare, personal relationships between the executive and council members, and the leader's personality and conceptualization of his or her role.

Some respondents indicated that, in some sites, tribal leaders and council members exert a more direct influence on the day-to-day delivery of child welfare services. At one site, there were discussions of the frequency with which parents unhappy with tribal program or tribal court actions complain to a tribal official, who in turn puts pressure on the program or court to alter its decision. At another site it was reported that a tribal official had instructed the child welfare program manager to give casework-related jobs to unemployed persons with no background or training. One public program administrator indicated that decisions about whether a particular case will be managed by the public or tribal program in that area sometimes are based on what needs to be done in the case and whether or not there might be repercussions for a tribal child welfare worker who recommended that course of action.

The problem of political pressures interfering with casework practice at some sites is discussed again later in this chapter. It should be noted, however, that this situation does not exist in all tribes. One tribal program director, apparently aware of the problem elsewhere, emphasized that, "The council here has withstood political consequences [to support the program]. For example, when a child is removed from the home, the council can come in for a lot of pressure, but has withstood it."

3. **Are tribal and CFR court judges who hear child welfare cases paid or volunteer? Full-time or part-time? Lay or professional? Approximately how many child welfare cases do they handle each month? What types of training have they had on the Indian Child Welfare Act?**

We visited six tribal courts and one Code of Federal Regulations (CFR) Court where judges hear child welfare cases that are being supervised by tribal programs. One of these--the Rosebud tribal court--also hears cases under the supervision of the State-operated child welfare program that is located on the reservation. In each of these seven tribal or CFR courts, between two and four judges hear child welfare cases. These judges are full-time in four courts and part-time in two, while one court has a mix of full- and part-time judges for child welfare issues. Judges were not queried directly about their legal training, but based on information from other sources it appears that judges for one tribe and the chief judge for the CFR court are trained attorneys, while judges at the other tribes and the other CFR court judges are laypersons.

During visits to the seven courts, we interviewed seven tribal court judges and one CFR court judge. Of these, six are full-time and two are part-time. Six are paid; the other two did not indicate whether they are paid or volunteer. Estimates by the full-time judges of the percentage of their time spent on child welfare cases range from 33 to 85 percent and average 41 percent. Estimates from all eight judges of the number of child welfare cases they handle each month range from 4 to 60 and average 23.

Six of the eight judges interviewed have attended conferences or training programs on implementation of the Indian Child Welfare Act. The most frequently cited source of training was the National Indian Justice Center, whose multi-day programs had been attended by four respondents. Other sources of training identified were the BIA, the American Indian Institute at the University of Oklahoma, and an attorney who has conducted training sessions under the auspices of the Association on American Indian Affairs. Of those judges who identified dates, four had attended programs as recently as 1986 or 1987. One respondent who had attended programs within the first years after the Act was passed apparently has not received training since then.

4. **When a tribe that operates its own child welfare program is notified that one of its children is involved in custody proceedings in a State court, who decides whether the tribe will accept or decline jurisdiction over the case? What are the criteria or reasons for accepting or declining jurisdiction? How frequently do tribes decline jurisdiction?**

At the visited tribal sites where tribes operate their own courts, the tribal court ultimately has the authority to accept or decline jurisdiction in a child custody case. The court's decision is guided by recommendations from the tribal child welfare staff. Before making a recommendation, tribal child welfare workers generally investigate the case to learn the circumstances, confirm the child's affiliation with the tribe, and determine the needs of the child and the child's parents. Often they will try to locate Indian family members able to provide temporary care for the child, thus assuring a placement for the child if jurisdiction is transferred.

It appears that, in at least one site, the tribal leader exerts influence in the decision-making process. A respondent there reported that, "The [Leader] can intercede and change or make decisions [about accepting jurisdiction]."

Tribes decline to accept jurisdiction for a variety of reasons. The following were mentioned most frequently by tribal court judges and child welfare program administrators.

- Another tribe also qualified for jurisdiction and was felt to be the more appropriate custodian--perhaps because the other tribe had located family members who could take the child, or the child had stronger ties to the other reservation, or the other tribe could provide specialized care needed by the child.

- The child had never lived on a reservation or had no ties to Indian culture.

- The tribe did not have the facilities or other resources to meet the needs associated with the child's special condition (e.g., spina bifida, blindness, severe physical or emotional handicap), so the tribe chose to leave the child under State jurisdiction because resources available through public child welfare programs could provide appropriate care.

- The child's Indian blood quantum was not sufficient to qualify her or him for tribal enrollment.

In some tribes, criteria for accepting or declining jurisdiction have been specified in writing. The Rosebud Sioux Tribal Council, for example, has approved criteria that are included in the Tribal Code.

Tribal child welfare program administrators were asked to estimate the frequency with which their tribes had been notified about children involved in State custody proceedings in the past two years and the frequency with which the tribes had declined jurisdiction. Three program administrators provided exact counts: the Gila River tribe had received 40 notifications in the preceding 2 years and had declined jurisdiction in 36 cases, or 90 percent; the Rosebud tribe had received 54 notifications and had declined jurisdiction in 39, or 72 percent; and the Salt River tribe had received 10 notifications and had declined jurisdiction in 2, or 20 percent. Three other program administrators provided estimates: 48 notifications, 75 percent declined; 54 notifications, 79 percent declined; and 300 notifications, 83 percent declined.

Data from case records of Indian children in public substitute care provide additional information. Of the children in public care whose case records were reviewed, 22 who had entered care under State jurisdiction are from the 7 visited tribes that can take jurisdiction in child custody matters. The public agency records indicated that the tribes had been notified or were aware of 18 of the 22 cases. The tribes had requested jurisdiction in four and had declined jurisdiction in nine, while five case records gave no information on this topic. Of the nine cases that were declined, two were declined by the tribes studied because other tribes with stronger ties to the children were involved, two were declined because the tribes were satisfied with the public agencies' case goals and plans for the children, one was declined because the tribe lacked services the child needed, and one was declined because the parent objected to a transfer. Case records did not specify why jurisdiction over the other three cases was declined.

5. What has been the impact of implementation of the Indian Child Welfare Act on tribes, tribal programs, parents and children?

Tribal and CIO respondents were asked how the Indian Child Welfare Act has affected tribes, their programs and their members. All felt that the overall impact has been positive, although a few negatives were mentioned.

Respondents see the Act as having had important impacts on Indian tribes. Most frequently mentioned was the affirmation of tribal sovereignty over Indian children. The Act is seen as enabling tribes to protect their children, control out-of-home placements and adoptions, and safeguard the children's affiliation with Native American culture. As one tribal judge said, "We are no longer losing our children."

Respondents see additional benefits to their tribes. "It has brought a certain amount of education to the reservation," said one respondent, "including some focus on child abuse and its effects on children." Establishment of a tribal child welfare program has given people "a place to go to get things done to protect children." Also, "The Act has caused the tribe to [consider] members not living on the reservation. [The tribe must ask itself,] 'Is there a legitimate claim to this child? What is our ability to handle the care and support for this child?'"

In discussing the Act's impact on tribal social services, several respondents observed that the tribe's child welfare program started with the Act--either because of the Act's Title II funds or because of the tribe's need to provide care for children transferred from State jurisdiction. Two program administrators observed that the Act has resulted in more responsibility for the tribal program, a third commented that the caseload has increased dramatically, and a fourth noted that a valued benefit has been a lot of good training. Some officials stated that implementation of the Act has resulted in increased interaction with public agencies. One respondent described a "good working relationship" with those agencies, while another said the contact "has made this agency and its staff 'more worldly' and more adept at accessing and working with the State."

Implementation of the Act has had an impact on tribal courts. Some courts were created because the Act was passed, and some tribes with existing courts created a specialized children's or juvenile court to handle child welfare matters. To assist the court in discharging its child welfare responsibilities, one or another of the tribes had established a case review board, codes for sexual abuse, and the positions of domestic relations counselor and ICWA coordinator assigned to the court.

Other impacts on the tribal court cited by respondents included enforcing State recognition of tribal courts, strengthening the credibility and jurisdiction of the courts, and fostering cooperative working relationships between tribal and State courts. Increased caseloads and workloads were mentioned frequently, as was the financial hardship resulting from the need for tribal representatives to appear in out-of-state courts.

Implementation of the Act has, of course, had important impacts on Indian parents. Respondents confirmed that fewer families lose children forever and many families are locating children because the law gives parents and extended families legal recourse. Also expressed repeatedly was the benefit to parents of being able to deal with child custody issues in tribal courts instead of the "foreign environment" of State courts. Respondents noted that "Parents don't feel as intimidated," and they "know that the tribal court is working in the best interests of the child." Furthermore, tribal court decisions take Indian cultural perspectives into account. "The tribal court imposes more culturally sensitive case plans. For example, we know it is common for more than one family to share a home, so we don't expect parents to arrange single-family housing."

The Act has encouraged establishment or expansion of tribal child welfare programs, and parents' interests also are served by this effect of the Act. Tribal programs give parents a place where they can "get help with runaway youth or children in trouble," and they enable "Indian families to have more interaction with tribal programs than with State agencies." The tribe's involvement in neglect and other child welfare matters as a result of the Act is seen as having an additional impact on parents: "Parents may not be aware of the Act, but they have had to become more accountable for their actions."

Respondents generally believe that the Act has had positive impacts on children. Much of the benefit is perceived as resulting from children's being under tribal jurisdiction, where their futures are determined by their own people and they are more likely to remain with their own families, tribes and culture. An additional benefit is that children removed from their parents' homes are placed with extended family more frequently than previously. "The emotional support provided by extended family can somewhat reduce the identity crisis [of being placed in substitute care]."

Creation and expansion of tribal child welfare programs are seen as another of the Act's positive outcomes for children. The tribal leaders we interviewed were unanimous in stating that services for Indian children have improved as a result of the Act. In addition, "More attention is being placed on young people," "Children are more protected," "We as adults are becoming more accountable to our children," and "[The Act] has removed child welfare cases from [tribal politics]."

One tribal respondent expressed a concern about the implications for children of the Act's evidentiary requirements for removal of a child by a State court. "In many cases it has been detrimental. It should be called the 'Indian Parent Act' because it gives the parent the excuse to get away with things a non-Indian couldn't get away with, since you must give clear and positive evidence of damage in order to remove a child. A 'preponderance of evidence' in order to remove a child on a temporary basis is a much better language and philosophy."

Most of the respondents believe that the Act has lessened the "unwarranted removal of children from their homes and tribe," although this opinion is not unanimous. Furthermore, as the survey data presented in Part I show, Indian children continue to be placed outside their own homes at a national rate 3.6 times that of other children.

B. Staffing and Services of Tribal Child Welfare Programs

In this second section, attention is focused more specifically on the delivery of services by tribal child welfare programs. Topics include staff characteristics and caseloads, child abuse and neglect report investigations, services for clients, and recruitment of foster homes. Assessments of tribal programs by tribal and public agency officials also are included.

1. What are the staff characteristics of tribal child welfare caseworkers? How large are their caseloads? Where do they turn for training and technical assistance on child welfare issues? What efforts do they make to recruit Indian students for social work education or training?

Characteristics of the child welfare workers in the eight tribal programs visited for this study are summarized in Table 6-5. Red Lake, with eleven caseworkers, has the largest staff, while the Fond du Lac program with one caseworker has the smallest. Both Arizona programs include white and Hispanic as well as Native American child welfare workers, while the other programs are staffed entirely by Native Americans.

Four of the programs have at least one MSW (i.e., person with a Master's degree in Social Work) on their staffs, and in five programs at least half of the staff have a Bachelor's or Master's degree in social work. The median number of years of child welfare experience ranges from one to nine years and is five years or more at half of the programs. All staff are full-time at seven programs. The eighth program has one full-time and one part-time child welfare worker. One worker had left the staff at each of four programs in the preceeding year.

The reported average caseloads for child welfare caseworkers at each program range from 10 to 42 children, with an 8-program average of 27 children. The number of children receiving child protection, substitute care, pre-adoption and aftercare services from each program ranges from 29 to 120, averaging 63 children. Across programs, between 20 and 63 children are in out-of-home placements, with the average being 33. Substitute care cases represent from 31 to 79 percent of the total caseload at each program; the average is 53 percent.

Administrators of the tribal programs believe that staff qualifications have an important effect on the programs. Said one, "Requiring a person with a Master's degree to run the program is very beneficial because it puts us on a footing as a professional agency, not just a helping group. Also, requiring continuing education [for staff] gives us more credibility in the eyes of the tribe." Another stated that the staff's qualifications are "essential for making a strong program. Relationships with clients are good because of professionalization [of program staff]. We have been the lead [tribal] agency

Table 6-5

Child Welfare Staff Characteristics of Tribal Child Welfare Programs

	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A (N=6)	Program B (N=8)	Program A (N=1)	Program B (N=7)	Program A (N=2)	Program B (N=2)	Program A (N=7)	Program B (N=7)
Race/Ethnicity	%	%	%	%	%	%	%	%
Native American	50.0	50.0	100.0	100.0	100.0	100.0	100.0	100.0
White	33.3	37.5	0	0	0	0	0	0
Black	0	0	0	0	0	0	0	0
Hispanic	16.7	12.5	0	0	0	0	0	0
Education	%	%	%	%	%	%	%	%
Master's, social work	16.7	37.5	0	0	0	100.0	14.3	0
Master's, non-social work	16.7	0	0	0	0	0	0	0
Bachelor's, social work	33.3	12.5	100.0	0	50.0	0	28.6	42.9
Bachelor's, non-social work	0	12.5	0	0	0	0	0	0
Some college, social work	33.3	0	0	27.3	0	0	42.9	42.9
Some college, non-social work	0	0	0	0	50.0	0	0	14.3
Some college, field unknown	0	25.0	0	36.4	0	0	0	0
High school	0	12.5	0	36.4	0	0	14.3	0
Child Welfare Experience	years	years	years	years	years	years	years	years
Mean*	5.8	7.6	5.0	1.7	2.5	6.9	1.6	7.6
Median*	5.0	7.0	5.0	1.0	2.5	6.9	1.5	9.0
Employment Status	%	%	%	%	%	%	%	%
Full-time	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Part-time	0	0	0	0	0	0	0	0

*Means and medians are based on workers for whom data were reported and are approximations. They probably underestimate the true numbers somewhat because years of experience usually are rounded down in reporting. Persons with between 5 and 6 years of experience, for example, probably were reported as having 5 years of experience.

to hire professional people." A third administrator said that programs "must have trained people in child protective services work. They must be able to make professional judgements. A lot of the work requires the good faith of and cooperation with other agencies. Actions and judgements must have the respect of other professionals in the field."

Tribal program administrators named the following as sources of training and technical assistance for their programs.

- Other professional people in the Indian community
- Bureau of Indian Affairs Anadarko Area Social Worker
- Oklahoma Department of Human Services
- U.S. Department of Health and Human Services Region VI Child Welfare Representative
- University of Minnesota at Duluth
- American Indian Law Center workshops
- Three Feathers Associates
- Seminars, conferences, publications

As tribal child welfare programs expand and public agencies place a higher priority on diversifying the racial/ethnic composition of their staffs, the demand for professionally trained Native American social welfare workers will increase. Thus, there is a need to encourage Native Americans to enter social work education and training programs. Two tribal child welfare administrators said their tribes have held job fairs to recruit Indians for such training, one tribe offers scholarships for Indian students, and four tribal agencies provide internship or field placement opportunities for Indian students enrolled in social work programs. Four administrators said their tribes have made no effort to recruit Indians for training in social work.

2. How do tribal child welfare programs handle child abuse and neglect reports for children living on the reservation? What is their role when they or nearby public agencies receive such reports for children living off of the reservation?

In six of the eight tribal sites, the tribal program responds to abuse and neglect reports on the reservation or trust lands in the same way that public agencies across the country respond to such reports in their own jurisdictions. A child protective services or other child welfare worker investigates the situation and determines the actions required. If court-ordered intervention is deemed necessary, the worker petitions the tribal court or CIO to take action.

The two exceptions are Fond du Lac and Rosebud, where child abuse and neglect reports on the reservation are handled by the local public child welfare program. At Fond du Lac, this situation exists because P.L. 280 gives the State jurisdiction on the reservation. At Rosebud, the local public agency is located on the reservation, and to avoid duplication of efforts, the two programs have agreed that the public agency will provide child protection services, including investigation of abuse and neglect reports. The tribal program is in the process of adding a protective services component. When it is ready to operate, the two agencies will revise their agreement to clarify roles and relationships.

When abuse and neglect reports concern off-reservation children, the role of the tribal program varies from site to site depending on public agency policies and procedures. Two tribal programs--Salt River and Sisseton--handle investigations near as well as on their reservations. The State of South Dakota has licensed the Sisseton tribal program to respond to all abuse and neglect reports involving tribal children in the 3-county area that encompasses the reservation. At Salt River, the public agency calls the tribal program office immediately, and tribal workers go off the reservation to conduct the investigation. Caseworkers at the Cheyenne & Arapaho program sometimes are asked to accompany public agency workers investigating a report. In other locations, public agency workers generally call or write the tribe in accordance with procedures designed to comply with the Indian Child Welfare Act.

3. What services are provided by tribal child welfare programs for families with children in substitute care? For what services do the programs make referrals? What services do program clients use most often?

Administrators of the eight tribal programs were asked about the provision of 18 types of service often required in the case planning for families with children in substitute care. Table 6-6 shows how many of the administrators said that their programs provide each service directly, how many make referrals for each service to other agencies or providers, and how many reported that each service is one that program clients use most often. Several administrators identified additional services either provided or referred. These are listed at the bottom of the table.

As the table shows, all eight programs provide caseworker counseling for client families and children, and seven of the eight offer parenting classes and transportation. Family counseling by someone other than a caseworker is provided by five tribal programs, as are parent, teen or adult support groups. All programs make referrals for mental health services. Seven of the eight refer for substance abuse treatment, physical health services, legal assistance and food banks, and six refer for financial services, educational or job training, homemaker services and child care. The services used most often vary from site to site. Family counseling is a high-demand service at four programs, and mental health services and parenting classes are most-used in three sites.

Table 6-6

Services for Clients of Tribal Child Welfare Programs

Service	Number of Programs that Provide Service Directly	Number of Programs that Provide Referral for Service	Number of Programs where Service is One Most Used by Clients
Therapy from a psychologist/ other mental health services	3	8	3
Caseworker counseling	8	1	2
Family counseling	5	4	4
Drug or alcohol treatment	3	7	2
Physical health services	1	7	
Financial services	3	6	1
Housing assistance	3	4	1
Employment services	2	5	1
Educational or vocational training	1	6	
Legal services	1	7	1
Homemaker services	2	6	1
Food bank	2	7	
Parenting classes	7	2	3
Child care	1	6	
Early childhood programs	3	3	
Parent, teen or adult support groups	5	2	1
Transportation	7	4	1
Youth activities	4	1	

Others mentioned as provided:

- Crisis hot line
- Dental program
- Home health aides
- Community health nursing
- Early intervention specialist
- Handicapped services therapist
- Clothing
- Adoptive home studies

Others mentioned as referred:

- Youth counseling
- In-patient health care
- Food and shelter

4. Do tribal programs have written standards for foster families? What is the experience of tribal programs with regard to recruiting and approving Indian foster families? Are tribal foster homes paid the same rate as homes used by public programs?

All eight tribal child welfare programs visited have written standards for foster families. At least six of the eight used State standards as a base and adapted them to the tribe's own circumstances and needs.

Three of the eight tribal child welfare program administrators, including heads of both Minnesota programs, reported that it has been relatively easy to recruit and license Indian foster homes. These programs have an average of 29 Indian foster homes. Reasons administrators gave for the ease of recruitment included a general interest in foster care and keeping children on the reservation, the importance of the extended family system within the tribe, and people's willingness to help.

In contrast, four administrators, including both of those in Oklahoma, said the task of recruitment has been difficult. These programs have an average of 19 Indian foster homes. Reasons given for difficulty in recruiting include: the community lacks awareness of the need; the time required to communicate the need, assess homes and complete the approval process is significant; alcoholism and other issues make it hard for Indian families to meet the specifications; and completing home studies often is difficult because applicants do not follow through.

In the past 2 years, the 3 programs that have experienced relative ease in recruiting foster families received applications from a total of 102 families and approved 28 percent of them. The four programs where recruitment has been difficult received a total of 85 applications in the past two years and accepted 74 percent. Reasons for not accepting more of the applicants were similar for the two groups of programs: families failed to follow through with the application process, some families did not meet the standards for approval, and staff time was insufficient to complete the necessary home studies and paperwork.

At all eight sites, administrators reported that tribal foster homes are paid the same rates as foster homes licensed by the State.

5. How do tribal leaders evaluate the tribal child welfare programs? What do local public child welfare administrators regard as the strengths and weaknesses of the tribal programs with which they work?

Tribal leaders were positive about the quality of tribal child welfare services--"especially considering the funding levels"--and optimistic about the future of the programs. One leader noted particular satisfaction with the staff's effectiveness in direct case work, another reported that program staff had received commendations from the State child welfare agency, a third said the program is "meeting all objectives: preventing removal, training, and counseling for high-risk parents," and still another offered the analogy that, "Overall, and in comparison to other ICW programs, we are about an '8' on a scale from 1 to 10."

Two officials identified specific efforts that are enhancing the programs of their tribes. One of these is the passage of tribal ordinances regarding sexual abuse. The other includes both increasing staff to support the court system and defining the roles of the child welfare program and the court.

Just as tribal officials were asked to identify strengths and weaknesses of public programs (Chapter 5, third section ["Staffing and Services of Public Child Welfare Programs"], Question 5), local public agency administrators were asked for their evaluations of tribal programs. The most commonly cited strengths are cultural sensitivity and success in arranging relative placements. High-quality staff was mentioned in several sites, and the effectiveness of advocacy efforts and the quality of tribal court case reviews also were named. One public administrator commented, "The [tribe] program is most organized and well-administered. Its involvement in training is quite good, and the people have high education levels. My observations are quite good!"

Public administrators identified some weaknesses in tribal programs. Difficulties noted include lack of staff, inadequate training for workers, and lack of staff continuity, "although that's probably true of [public programs] too." The public administrators repeatedly cited insufficient or intermittent funding as a primary cause of tribal program problems such as high staff turnover, supervisors' time diverted from service monitoring to grant writing, and inability to provide foster care placements during the latter part of each funding year.

Several administrators are concerned about the impact that tribal politics may have on child welfare services. Tribal councils' lack of commitment to child welfare was mentioned in two states. In a third state, a respondent said, "The separation of powers is not as strong [as it is in public program settings], so tribal councils more often get involved in cases by trying to influence or replace judges." Another public program official in a different part of that state said, "Political pressures are a weakness. There is not sufficient separation of powers between tribal council and the judicial system. Workers sometimes can't write case service plans because they aren't backed up. The tribe has a [committee] to which parents can take grievances. This group often wants an open forum discussion of cases and ignores confidentiality."

In a different state, a public administrator expressed the problem in this way: "[Tribe] is a small, tight-knit community with very interrelated members. Different standards are applied across cases. For instance, if a person involved in a case is related to someone on the [tribal council] who is your boss, what are you going to do? The caseworker is often in the middle. This has caused more than one caseworker to quit."

Local public program administrators expressed other concerns. One said that, "Tribal court systems are fairly lax. They don't follow time lines, may or may not hold a hearing on the date scheduled. This is especially a problem for us if we and the family have traveled to the reservation and then nothing happens." The most vehement criticism, from an administrator who identified no strengths of tribal programs and noted a "constant turnover of staff," was that "they don't know what they are doing" and "haven't really protected the children."

One public administrator said that "Objectivity versus cultural understanding is a problem for tribal workers. They are sometimes accused of being too subjective, while we are accused of cultural insensitivity even though we presumably are more objective." Tribal programs' "inconsistency in assuming jurisdiction" troubled another administrator. "They pick the cases they want." The Indian Child Welfare Act, of course, makes clear tribes' right to decline jurisdiction over a case. Given that the tribes visited for this study make jurisdiction decisions based in large part on their ability to provide the resources needed by a particular child, this selectivity could be seen as a positive, rather than a negative, practice.

C. Substitute Care Casework Practices

This section describes key substitute care case planning and management practices of tribal child welfare programs as reflected in a sample of case records from the eight tribal programs visited for this study. These practices, such as written case plans and periodic case review, are specified in Public Law 96-272, the Adoption Assistance and Child Welfare Act of 1980. They are discussed here because they represent generally accepted standards of good casework, not because they are legal requirements of tribal programs. In fact, the requirements of P.L. 96-272 do not apply to tribal programs except where the tribe is functioning as a provider of services for the State under a formal mechanism, such as a purchase-of-service agreement or a State-Tribe contract (e.g. a IV-E contract; see the discussion of funding sources earlier in this chapter).

The data reported in this section were extracted from case records of 121 children in tribal substitute care at the eight tribal programs visited for the field study. The method by which cases were selected and characteristics of the 121 children are described in Chapter 4.

Frequently, cases involving Indian children and families who are living at a distance from their reservation or trust area begin with public agency involvement. Upon receipt of notification that the children are involved in State court proceedings, the tribe or parent may request that jurisdiction be transferred to the tribe. Cases involving children and families who live on or near their reservation or trust lands may begin with either tribal or public agency involvement, depending on policies and procedures in that state and the relationships worked out between the particular tribal and public agencies involved.

Of the 121 children whose case records were reviewed, 100, or 83 percent, were under tribal jurisdiction. Of these, 46 percent had begun this substitute care episode under State jurisdiction and then were transferred to the tribe, and 54 percent had been under tribal jurisdiction from the outset.

These proportions vary by state. In the Arizona programs, only 12 percent of cases under tribal jurisdiction had started in State custody. In Minnesota, the figure is 29 percent. In the Oklahoma and South Dakota programs, transfers represent, respectively, 66 and 79 percent of cases under tribal jurisdiction. Site-by-site data are presented in Table 6-7. The reader should keep in mind that the number of cases reviewed was relatively small at some sites and cases were not sampled randomly. Therefore, these percentages and those reported in the following pages should be viewed as indicative rather than definitive.

1. What efforts do tribal child welfare programs make to prevent placing children in substitute care?

Of the 121 children in substitute care under the supervision of tribal child welfare programs whose case records were reviewed for this study, 54 had begun this substitute care episode under tribal jurisdiction. In 20, or 37 percent, of these cases, case records documented tribal program attempts to prevent out-of-home placement. Preventive efforts consisted primarily of counseling by a caseworker, which occurred in 19 of the 20 cases in which preventive efforts are noted in case records. Other preventive efforts covered a wide range, including referrals to mental health, physical health and substance abuse services in 6 of the 20 cases.

2. When children must be placed in substitute care, into what types of settings are they placed?

The traditional Indian family is extended rather than nuclear, and the extended family in many Indian cultures includes members of one's clan who are not related by blood or marriage. Extended family members often care for one another's children for protracted periods of time, not as parent substitutes, but as family members with traditional child-rearing responsibilities that extend to all children of the family. Recall from Table 4-4, for example, that among children whose case records were reviewed for this study, 10 percent of those in public programs, 14 percent of those in tribal programs and 6 percent of those in BIA programs had been in the care of a relative other than a parent when the substitute care episode began.

With this cultural emphasis on extended family, one would expect tribal programs to place a priority on using extended family as substitute care placements whenever possible. In many tribes, the term "informal care" is used to designate relative placements. In fact, placing a child in a formal caregiving situation may be viewed by some as a violation of cultural norms, although this often is done for financial reasons.

Table 6-8 displays data on substitute care placements of the children in tribal programs whose case records were reviewed. The data reflect both open and closed cases, so for children still in substitute care at the time of the

Table 6-7

Jurisdiction over Children in Substitute Care in Tribal Child Welfare Programs

Jurisdiction	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A (N=16)	Program B (N=19)	Program A (N=15)	Program B (N=16)	Program A (N=19)	Program B (N=11)	Program A (N=13)	Program B (N=12)
	%	%	%	%	%	%	%	%
Tribal	93.8	94.7	0	87.5	100.0	90.9	92.3	100.0
State	6.3	0	100.0	6.3	0	9.1	7.7	0
Unable to Determine	0	5.3	0	6.3	0	0	0	0

Table 6-8

Substitute Care Settings of Children in
Tribal Child Welfare Programs

Substitute Care Setting	Arizona Program A (N=16)	Arizona Program B (N=19)	Minnesota Program A (N=15)	Minnesota Program B (N=16)	Oklahoma Program A (N=19)	Oklahoma Program B (N=11)	South Dakota Program A (N=13)	South Dakota Program B (N=12)
	%	%	%	%	%	%	%	%
Foster Home - Relative	0	26.3	40.0	31.2	42.1	54.5	23.1	41.7
Foster Home - Unrelated	50.0	68.4	53.3	37.5	52.6	36.4	61.5	50.0
Group Home	31.3	5.3	6.7	6.3	0	0	7.7	0
Residential Treatment Facility	18.8	0	0	25.0	0	0	0	8.3
Other Setting	0	0	0	0	0	9.1	7.7	0
Unable to Determine	0	0	0	0	5.3	0	0	0

review, the current placement is reported, while for children no longer in care, the final placement before leaving substitute care is given.

The data in Table 6-8 testify to the emphasis of Indian cultures on family caregivers. Overall, 31 percent of the children whose cases were reviewed were living with relatives. Although one tribal program had no reviewed cases in relative placements, the percentage of children living with family members at the other seven programs ranged from 23 to 54 percent.

Not all children in tribal care can be placed with relatives. Among the cases reviewed, 52 percent of the children had been placed in non-relative foster homes. Of these, 37 percent were in homes of Indian families and 24 percent were living with non-Indian families, while for 40 percent the race/ethnicity of the foster parents could not be determined from the case record. The 8-program total of 83 percent placed in relative or non-relative foster homes is substantially larger than the 69 percent reported by tribal programs in the mail survey portion of this study (see Chapter 3 of this report, Table 3-8).

In the mail survey, children in various group settings represented 21 percent of those in tribal care. In contrast, 14 percent of the children whose case records were reviewed were in group facilities of some sort. Only three of the case records indicated who operated the group facility, and in two of these cases the facilities were Indian-operated. Administrators at both Oklahoma programs said that boarding schools sometimes are used as substitute care placements, but whether or not this applies to any of the reviewed cases is unknown.

3. What goals for permanency are established for children in out-of-home care?

In the nationwide mail survey reported in Chapter 3, 70 percent of children in tribal care for whom case goals were reported had goals leading to family-based permanency. Specifically, 50 percent had a goal of returning home, 14 percent had placement with a relative as a goal, and 6 percent had a goal of adoption. For 13 percent of children represented in the mail survey, the goal was either long-term foster care or emancipation upon reaching the age of majority. Five percent of cases had some other goal, and no goal had been established for eleven percent (see Table 3-10).

At the eight tribal programs in the field study, case records were examined to determine the case goal. The current goal was noted for children still in substitute care at the time of the review, while the initial goal was recorded for children whose cases had been closed. As in the mail survey, family-based permanency was the goal for 70 percent of the cases, although the distribution among the three family-based goals is different. The goal of reunification occurred in 46 percent of field study cases, similar to the 50 percent figure in the survey. The goal of relative placement was less prevalent among reviewed cases than in survey cases: 9 percent for the former compared to 14 percent in the latter. Adoption, on the other hand, was a more frequent goal for reviewed cases than for those in the survey: 15 pecent compared to 6 percent. Long-term care or emancipation was the goal for 25 percent of reviewed cases, nearly twice the 13 percent figure in the survey. For 5 percent of field study cases, a goal had not been established or could not be determined.

Across the eight tribal field study sites, there appears to be considerable variation in the frequency with which different case goals are established for out-of-home children. Table 6-9 shows the site-by-site distribution of case goals. Among the eight programs, the percentage of children with a goal of reunification ranges from 26 to 73 percent. Placement with relatives was assigned to no more than 20 percent of cases at any site, and adoption appeared in from 6 to 33 percent of each site's case records. Long-term or permanent foster care or independent living were the goals for between 0 and 64 percent of the children at each site.

4. What proportion of children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

Table 6-10 reports findings on these issues. Overall, 65 percent of reviewed case records contained written case plans. At six of the eight tribal programs, written plans were present in 50 percent or more of the records reviewed. The proportion of records at each site with written case plans ranges from 27 to 92 percent. The frequency with which the plans in the case records had been signed by the parents is much smaller, not exceeding 50 percent at any site. It thus appears that having parents sign the case plan may not be a routine practice among tribal programs.

As Table 6-10 shows, the prevalence of voluntary placements varies from site to site, appearing to be lower in the Oklahoma and South Dakota programs than in Arizona and Minnesota. The proportion of voluntary placements that are documented by written agreements ranges from 43 to 100 percent and is 63 percent across programs.

5. By whom and how often are cases reviewed?

At the tribal programs we visited, periodic case review is a standard part of child welfare service delivery. Six of the tribal courts and the CFR court review substitute care cases at least every 6 months, with 3 months being the standard for the South Dakota tribal courts. Because all children being served by the Fond du Lac tribal program are under State jurisdiction, the tribal court there does not review substitute care cases.

Four of the eight tribal programs employ supervisory reviews to monitor progress on each case. These are performed quarterly at both Arizona programs, annually and "as needed" at the others. Various programs also use a children's review board, an inter-agency committee, an administrative panel, and periodic

Table 6-9

Case Goals for Children in
Tribal Child Welfare Programs

Case Goal	Arizona Program A (N=16)	Arizona Program B (N=19)	Minnesota Program A (N=15)	Minnesota Program B (N=16)	Oklahoma Program A (N=19)	Oklahoma Program B (N=11)	South Dakota Program A (N=13)	South Dakota Program B (N=12)
	%	%	%	%	%	%	%	%
Return Home	43.8	42.1	73.3	43.8	26.3	27.3	61.5	50.0
Placement with Relative	6.3	10.5	6.7	18.8	5.3	0	15.4	8.3
Adoption	18.8	10.5	13.3	6.3	21.1	9.1	7.7	33.3
Long-term Foster Care	25.0	31.6	0	18.8	26.3	54.5	7.7	8.3
Independent Living or Emancipation	6.3	5.3	0	6.3	0	9.1	0	0
Emergency Care	0	0	0	0	5.3	0	0	0
Goal Not Yet Established	0	0	6.7	0	0	0	0	0
Unable to Determine	0	0	0	6.3	0	0	7.7	0

Table 6-10

Prevalence of Written Case Plans and Voluntary Placement Agreements for Children in Tribal Child Welfare Programs

	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A (N=16)	Program B (N=19)	Program A (N=15)	Program B (N=16)	Program A (N=19)	Program B (N=11)	Program A (N=13)	Program B (N=12)
Presence of Written Case Plan in File	%	%	%	%	%	%	%	%
Plan Present, Signed by Parent	13.3	10.5	20.0	0	5.3	0	7.7	50.0
Plan Present, Not Signed	73.3	57.9	60.0	50.0	57.9	27.3	38.5	41.7
No Plan	6.7	21.1	20.0	50.0	26.3	72.7	53.8	8.3
Unable to Determine	20.0	10.5	0	0	10.5	0	0	0
Voluntary Placements								
Number of Voluntary Placements	5	8	3	7	3	1	2	1
Percent with Written Voluntary Placement Agreement Present in File	80.0	62.5	66.7	42.9	66.7	100.0	50.0	100.0

staffings to assure that case goals and activities are moving toward permanency for the children.

Case records examined at the tribal programs provide an indication of the frequency with which substitute care cases are reviewed. It should be noted that child welfare case records are at times incomplete in their documentaion of case reviews, particularly non-court reviews. In searching records for case review data, the recurrent question is whether the last recorded review is in fact the most recent review. The question becomes more significant as the most recent review date found in the case record grows more distant. Our experience suggests that the data collected probably reflect a mix of case documentation practices and actual case review histories.

In the tribal program case records, the apparent date of the most recent case review could be determined for 79 cases, or 65 percent of the total. The average time since the last case review for these 79 cases was 4.2 months. Among the cases, 81 percent had been reviewed within the preceding 6 months, 10 percent had been reviewed 6 to 11 months earlier, and for 9 percent, the elapsed time since the last case review noted in the case record was 1 year or more. For 89 percent of these cases, the most recent review had been a court review.

Site-by-site data on the elapsed time since the most recent review are given in Table 6-11. Recency of review varies considerably from site to site, as does the extent to which case records provide review data. The proportion of cases that had been reviewed within 6 months of the site visit date (for open cases) or the date the case was closed (for closed cases) ranges from 26 to 85 percent. The figure exceeds 80 percent in both South Dakota sites. The average elapsed time at each site ranges from 1.5 to 8.7 months.

6. How long do children in the care of tribal child welfare programs remain in substitute care? How many different placements do they have while in care?

In the nationwide mail survey, 81 tribal child welfare programs provided data on the length of time in substitute care for children in care on the reporting date. Among these programs, 26 percent of children had been in care less than 6 months, 21 percent had been in care 6 to 11 months, 19 percent had been in care 12 to 23 months and 28 percent had been in care 2 years or longer. For the other 6 percent, length of time in care was unknown (see Chapter 3, Table 3-7).

At the 8 tribal programs visited, we reviewed case records for a total of 61 children whose cases still were open on the day of the review. Among the 57 children for whom these data were available, the average length of time in tribal care during this substitute care episode is 29 months. Records show that 9 percent had been in tribal care less than 6 months, 19 percent had been in care 6 to 11 months, 32 percent had been in care 12 to 23 months and 40 percent had been in care 2 years or longer. (Note that the data being reported reflect the length of time in tribal care. Forty-two percent of these children

Table 6-11

Elapsed Time Between Most Recent Case Review and
Data Collection Date (open cases) or Date of Case Closing (closed cases) for
Children in Tribal Child Welfare Programs

	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A (N=16)	Program B (N=19)	Program A (N=15)	Program B (N=16)	Program A (N=19)	Program B (N=11)	Program A (N=13)	Program B (N=12)
	%	%	%	%	%	%	%	%
Less than 1 Month	25.0	0	20.0	12.5	0	0	46.2	33.3
1 to 2 Months	12.5	26.3	13.3	12.5	21.1	45.5	30.8	33.3
3 to 5 Months	18.8	10.5	20.0	18.8	5.3	18.2	7.7	16.7
6 to 11 Months	0	5.3	6.7	6.3	15.8	18.2	0	0
12 Months or More	18.8	10.5	0	0	10.5	0	0	8.3
Unable to Determine	31.3	47.4	40.0	50.0	47.4	18.2	15.4	8.3
Average (in months)	4.7	5.6	2.8	3.6	8.7	4.1	1.5	2.8

(Overall average: 4.2 months)

had been removed from their homes by a State agency and then transferred to the tribal program. Information on the date of initial removal often was not available.)

Findings from each program about the length of time in tribal care during this substitute care episode are displayed in Table 6-12. Compared to the tribal program data obtained through the mail survey, it appears that larger percentages of children in the field study programs have been in care longer. These percentages are based on small numbers, however, and there is considerable variation among the eight programs. The average time in care at each program ranges from 15 to 46 months.

Another indication of the length of time children spend in tribal substitute care comes from records of cases closed prior to the date of our site visit. For the 55 children for whom time in care could be determined, the average is 18 months. Of these children, 35 percent spent less than 6 months in tribal care, 24 percent were in care 6 to 11 months, 16 percent were in care 12 to 23 months and 25 percent were in care 2 years or longer. Site-by-site data in Table 6-12 show that the average for children at each program ranges from 4 to 36 months. (Again, 37 percent of these children had been removed from their homes before their cases became the responsibility of the tribal program, but the data reflect the length of time in tribal care only.)

For all eight programs, the average time in care for children whose cases were closed when data were collected is less than for children whose cases were still open. This is because open child welfare cases frequently include a greater number of cases in which permanency is difficult to achieve, resulting in prolonged time in care, whereas cases that are closed are more likely to be those in which reunification or relative placement was possible, and which therefore could be closed more quickly. The distribution of case goals for open and closed cases at these programs illustrates this difference. Of the closed cases reviewed, 75 percent had reunification or relative placement as a goal, while 10 percent had the goal of long-term care or emancipation. In contrast, 34 of the open cases had a goal of reunification or relative placement, while 39 percent had a goal of long-term care or emancipation.

Also examined was the number of different substitute care settings in which children are placed during one out-of-home episode. Of the 112 children whose case records contained this information, the average number of settings is 2.0--2.3 for open cases, 1.8 for closed cases--and the average by program ranges from 1.1 to 3.7 placements. Half of the children (50 percent) had lived in the same setting throughout this substitute care episode, 22 percent had had 2 placements, 16 percent had been in 3 settings and 12 percent had been in 4 or more.

7. What are the outcomes for children who leave tribal substitute care? For what proportion of children who are adopted are adoption subsidies provided?

Results of the nationwide mail survey reported in Part I indicate that 83 percent of children discharged from tribal programs nationwide are discharged

Table 6-12

Length of Time in Substitute Care for Children in Tribal Child Welfare Programs

	Arizona		Minnesota		Oklahoma		South Dakota	
Time in Care	Program A	Program B	Program A	Program B	Program A	Program B	Program A	Program B
Open Cases								
	(N=6)	(N=9)	(N=9)	(N=10)	(N=9)	(N=6)	(N=6)	(N=6)
	%	%	%	%	%	%	%	%
Less than 6 Months	0	0	11.1	20.0	0	16.7	16.7	0
6 to 11 Months	16.7	0	33.3	30.0	11.1	33.3	16.7	0
12 to 23 Months	33.3	33.3	22.2	40.0	0	33.3	33.3	50.0
24 to 35 Months	16.7	22.2	0	10.0	44.4	0	0	33.3
36 to 59 Months	16.7	22.2	0	0	33.3	0	0	0
60 Months or Longer	16.7	22.2	11.1	0	11.1	16.7	16.7	0
Unable to Determine	0	0	22.2	0	0	0	16.7	16.7
Average (in months)	41.9	46.2	19.5	14.5	40.1	21.1	20.4	23.3
(Overall average: 29 months)								
Closed Cases								
	(N=10)	(N=10)	(N=6)	(N=6)	(N=10)	(N=5)	(N=7)	(N=6)
	%	%	%	%	%	%	%	%
Less than 6 Months	10.0	10.0	83.3	83.3	30.0	20.0	28.6	16.7
6 to 11 Months	20.0	30.0	16.7	0	0	80.0	28.6	16.7
12 to 23 Months	10.0	10.0	0	0	30.0	0	14.3	50.0
24 to 35 Months	20.0	10.0	0	0	0	0	0	16.7
36 to 59 Months	40.0	0	0	0	20.0	0	0	0
60 Months or Longer	0	40.0	0	0	0	0	0	0
Unable to Determine	0	0	0	16.7	20.0	0	28.6	0
Average (in months)	26.6	35.5	3.9	3.8	17.4	7.7	10.1	16.0
(Overall average: 18 months)								

to a family setting: 55 percent are reunified with their previous caregiver, 19 percent are placed with non-parent relatives, and 9 percent are adopted. Another 6 percent are emancipated when they reach the age of majority, and 7 percent are transferred to another agency (Table 3-17).

Among closed cases reviewed at the eight field study programs, 88 percent of the children had been discharged to a family setting: 54 percent were reunified, 15 percent were placed with non-parent relatives, and 19 percent were adopted. Seven percent of discharged children were emancipated and three percent were transferred to another agency.

As in other matters, while the small number of closed cases that were reviewed must be kept in mind, there appear to be differences in the frequency of various case outcomes among the eight field study sites. Data in Table 6-13 show that four of the programs exceeded the nationwide rate of 55 percent reunification, and at Fond du Lac all closed cases reviewed had been closed because of reunification. In contrast, in two of the programs, even when reunification and relative placement are combined, the proportion of cases in which children were discharged to their families does not reach 50 percent. Three programs had no adoptions among closed cases that were reviewed, while in one program adoptions represented 44 percent of closed cases. Only 3 programs had children "age out" of substitute care, and case outcome was unaccounted for in only 2 of the 60 cases.

Of the eleven children who were discharged to an adoptive home, an adoption subsidy appears to have been provided for only one. The source of the subsidy (i.e., Federal, State, Tribal or other program) was not identified in the case record. The basis for the subsidy included a handicapping condition.

D. Program Needs

This last section reports respondents' assessments of the past, present, and future of tribal child welfare programs, including problems encountered and needs to be addressed. Included are tribal officials' suggestions as to how the Title II program and other Federal assistance can be made more effective. Data for this section come from interviews with tribal respondents and local public child welfare administrators.

1. What problems have tribes experienced in developing the capabilities to provide child welfare services for children and families?

Almost universally, tribal respondents cite inadequate and unstable funding for child welfare services and related tribal court operations as major roblems for tribal programs. As one tribal court judge observed, "The Federal ICWA clarifies the authority of Indian tribes, but there is not enough money to carry out the full intent of the law, which requires (1) a network of social services; (2) a court system; and (3) cooperation with the counties. We have the third, but without all three things in place, it destroys the ability of the tribes to implement the law."

Table 6-13

Outcomes for Children Discharged from Substitute Care in Tribal Child Welfare Programs

Outcome	Arizona		Minnesota		Oklahoma		South Dakota	
	Program A (N=10)	Program B (N=10)	Program A (N=6)	Program B (N=16)	Program A (N=6)	Program B (N=10)	Program A (N=5)	Program B (N=7)
	%	%	%	%	%	%	%	%
Returned Home	60.0	40.0	100.0	50.0	30.0	40.0	57.1	66.7
Placed with Relative	10.0	30.0	0	33.3	10.0	0	14.3	16.7
Adopted	10.0	30.0	0	0	40.0	0	28.6	16.7
Emancipated	20.0	0	0	0	10.0	20.0	0	0
Discharged to Another Agency	0	0	0	0	0	40.0	0	0
Unable to Determine	0	0	0	16.7	10.0	0	0	0

Other tribal officials commented on specific areas where lack of funds limit the delivery of services. "We only begin to work when a crisis is presented. There are no funds for preventive or educational work." "There is not enough money to support full operations of the court or to support children in tribal care. The tribe has not accepted jurisdiction in a number of cases due to special needs of children." "Resources are not available to provide attorneys for the tribe and families." "Our biggest problem is [the cost of] attending court hearings in other states." "We can't afford the burden of expense to transfer cases from other areas or states."

Although 638 contracts for child welfare, once written, generally are continued from year to year, Title II and other grant funds are awarded annually, and a tribe that receives grant funds one year may not receive them the next. This unstable funding also creates problems for tribal programs. As one tribal program administrator said, "It takes a lot of effort to write grant applications and we're doing it all the time to fill holes left by withdrawal of Federal monies. Another consequence is that the tribal council wonders why the program didn't get funded this time, wonders what's wrong with the program. This may generate a loss of confidence."

Administrators of public child welfare programs also cited ways that funding problems have affected tribal staffs and services adversely. "Yearly grant funding means high staff turnover." "Budget cuts have weakened the programs." "The major problem is money. If they had dollars they could hire and keep good people and have good programs." "Yearly grant writing cuts into [the administrator's] time." "They always seem to be running out of money for foster homes, so often they don't intervene."

In addition to money issues, the other problem identified by some tribal respondents as hampering their child welfare programs is the interjection of political considerations into service delivery decisions. One tribal court judge said, "The tribe had difficulty at first separating political, court and community views. The council passed a resolution to clarify matters." This issue is discussed more fully elsewhere in this chapter.

2. In addition to those services already being provided or referred, what other child welfare-related services do clients of tribal child welfare programs need? What needs do tribal officials project for tribal child welfare programs over the next two years?

One or more tribal program administrators named each of the following as an additional service needed by clients.

- Preventive and early intervention services.
- Substance abuse services; alcoholism counseling for juveniles and adults.
- Family-based services, including a strong family therapy program.

- Skill training for family members to become more employable.
- Day care, child care.
- Services for young children so they will be better parents themselves.
- Services for dealing with sexual abuse.
- Youth/adolescent services, including: youth activities; juvenile runaway services.
- Programs for elderly, including intergenerational programs such as "adopt-a-grandmother."
- Mental health services.
- Outpatient medical care.
- Transportation system.
- Information and referral.

In addition to these specific services needed by clients, respondents also identified many programmatic areas needing improvement or expansion. The following comments were made by one or more respondents.

- Develop an internal network to handle child welfare matters--24-hour crisis intervention, emergency shelters, stronger relations with public resources.
- Bring program into conformity with State IV-E standards.
- Provide improved or expanded facilities including space for treatment and group work, automated computer system specific to the social service agency.
- Secure a staff automobile.
- Expand programming to encompass:
    - prevention programming, including parent effectiveness training, community awareness;
    - early childhood family education program;
    - teen pregnancy and teen parent programs;
    - certified adoption program;
    - improved coordination of foster homes, foster parent training, foster parent support group;

  - independent living program for transition from foster care to living alone;
  - family aftercare program;
  - off-reservation programming.

Develop tribal facilities, such as:

  - all-purpose family crisis shelter;
  - tribal youth shelter;
  - detention facilities;
  - youth group homes.

- o Attend to staff needs, including:
  - accredited training and increased technical assistance in areas including prevention, protective services and communication skills;
  - increased staffing, including addition of support staff;
  - guidance procedures manual for staff;
  - tribal attorney on staff.

Respondents identified some needs relevant to the tribal court.

- o Expansion of court to handle more juvenile offenses.
- o Tribal children's code and adoption code.
- o Judicial system with money to address tribe's own problems.

There also were comments related to the broader context of tribal social services delivery.

- o Improve overall system--social services, child welfare, tribal police and court.
- o Institute long-term planning for social services to allow orderly acquisition of contract services.
- o Improve the separation of powers to provide protection for workers so they can make decisions without worrying about their jobs.
- o Expand the use of private funding.

- Advocate for inclusion of Indian child welfare in college and university curricula for social workers.

3. What modifications do tribal officials suggest to increase the effectiveness of Federal assistance to tribal child welfare programs?

Tribal respondents offered many suggestions for improving Federal assistance to their child welfare programs. The majority of their comments focused on Title II grants. Not surprisingly, many noted the need for increased funds. As one tribal leader said, "There is never enough money!" A child welfare program administrator noted the need for funds specifically to support a juvenile court.

Several tribal officials said that the competitive nature of the Title II program should be changed. "It should be non-competitive." "Funding for all Indian tribes should be in place." "[Currently] only the good proposal writers get funded."

Other respondents spoke of putting the award process on a more objective basis. "The BIA should restrict competition through an objective methodology. It should say that programs won't be considered if they don't serve at least 'X' number of children, et cetera." Others said there is a "need to determine a fairer way to handle formula funding." For example, "[Consider] tribe data, BIA data, the most current census information." Also, "Consider tribal service area and population factors [such as problem prevalence]; give a base amount to all tribes."

The BIA has converted the ICWA's list of the types of programs that may be funded under Title II into a list of program priorities that are used to rank applications that otherwise are evaluated as equal. Some respondents object to the establishment of these priorities, seeking "more flexibility in the use of the dollars." Said one, "The BIA should consult the tribes in setting priorities for program areas, rather than us having to write a proposal for what the BIA central office thinks we should have."

Several tribal officials said that the process by which applications are reviewed and rated needs to be improved. "The review and negotiation process needs to become more formalized and follow a chain of command." "Tribes doing an excellent job should be rewarded. Provide incentive funding for outstanding Indian child welfare programs." "It appears that program services are not looked at or considered."

Also suggested for modification was the "short time frame for submission and the delays in notification from BIA." Similarly, "The budget modification process and paperwork need to be reduced."

The burden of preparing a new funding application each year and the uncertainties of year-to-year funding have been discussed earlier. These problems led respondents at tribes that are not under the new multi-year award process to suggest that Title II "Eliminate the yearly cycle of funding. It's a tremendous drain on resources." Also noted was the need for a "guaranteed amount so that we're not always wondering how much money we're going to get year by year."

Where multi-year awards have been made, respondents are finding that the new process does not necessarily eliminate the burden of annual applications. "The 3-year grant process is cumbersome. We have to almost provide a full application every year."

An additional suggestion for increasing the effectiveness of programs operated with Title II funds was to increase the availability of training and technical assistance. "[Through contracts,] the BIA could provide more technical assistance to tribes to help them implement the Act. It's systems and networks that allow you to work with families. You need staff, policies and procedures, a trained court system. The BIA needs to provide avenues to assist tribes if they want it."

Tribal respondents identified ways to increase the effectiveness of other Federal assistance to tribal child welfare programs. For example, one tribal official said that, "IV-E paperwork is horrendous--almost a book for each child. Documentation is the most time consuming."

A number of comments were directed toward the mechanism of the "638 contract" under which responsibility for operating the child welfare program is transferred from the BIA to the tribe. "Provide more reliable budget planning figures," said one respondent. "Allocations do not become final until the fourth month of operations." "Remove the requirement that we cannot exceed a certain dollar limit for foster care." "638 should cover administrative costs, not make us negotiate with the social services budget separately."

Long-standing dissatisfaction with the 638 mechanism was evident at some sites. "[Before our 638 contract,] BIA had a contract with the State for the State to provide care for some children. When the BIA turned child welfare over to the tribe, the tribe was supposed to get separate money to pick up the cost of care for those children, but the tribe has never gotten the money. So, the tribe is having to use other monies to pay for these children--about $8,000 per month." Asked what might be changed to improve the 638 mechanism, one respondent said, "Everything! If this is [supposed to be] for Indian self-determination, it isn't. It's just a changeover in how the BIA provides child welfare services. Often, BIA monitors have no knowledge of child welfare, so when we have something important to report, they don't know what we're dealing with."

Several tribal respondents made more general comments about Federal funding and other Federal resources. One observed the need to increase the availability of program services grants. Another suggested that the government "coordinate BIA and HHS [i.e., Department of Health and Human Services] proposal mechanisms so we don't have to write two proposals and two sets of progress reports with different deadlines." A third said that "ACYF [the Administration for Children, Youth and Families in DHHS] should take a stronger advocacy role for the Indian Child Welfare Act."

One tribal program administrator suggested the following set of general criteria for use in awarding funds.

- Make sure that linkages exist between Indian and non-Indian providers.
- Look at long-term permanency planning instead of crisis intervention. [There is a] growing consensus that programs must have linkages, must consolidate resources because there aren't enough to go around, and a band-aid approach is not going to work. It will have children in and out of care.
- Fund programs that have shown themselves to be effective in working with Indian families and with State courts. Insist that public programs work with tribal programs; insist that there be cooperation.
- Kids have to become a priority. We must have funding to support this and the multitude of resources necessary to address family needs. It is much cheaper than the per diem in corrections later [when they are] adolescents.

While some respondents noted the need for training and technical assistance in conjunction with Title II funding, others identified it as a general need. For example, "We would like technical assistance. We need direction for program administration and management."

Chapter 7

Bureau of Indian Affairs Child Welfare Services

The Bureau of Indian Affairs (BIA) is responsible for most facets of the relationship between the Federal government and Native American tribes, bands, and villages. Originally part of the War Department, the BIA was moved to the Department of the Interior in 1849. Among its duties are the management of the Indian lands that are held in trust by the Federal government, including reservations and tribal trust lands, and the specification of those tribes, bands, communities, villages, and pueblos that are recognized as having a "special relationship" with the United States and whose members therefore are eligible for certain Federally administered services.

The organization of the BIA is three-tiered. The central office is housed in the Department of the Interior in Washington, DC. There are 12 BIA Area Offices located across the country, each with administrative and supervisory responsibilities for the local BIA agencies operating within its area. The approximately 95 local agencies are the direct-service arms of the BIA. Most are located on or near Indian reservations, Alaska Native villages or other tribal trust areas. Each is responsible for a variety of services to one or more Federally recognized tribes in the vicinity, providing the services either directly or through contracts with the tribes.

It is a common but incorrect assumption that the BIA is intended to be the primary provider of social services, including child welfare services, for American Indians and Alaska Natives on Indian lands. In fact, this responsibility is assigned to the States, which are to serve Indians on reservations as they serve all other state residents. Because of jurisdictional and financial issues, however, this responsibility has not always been fulfilled.

To fill the gap, the Snyder Act of 1921 (Public Law 67-85) established an Indian Child Welfare Assistance program. The purpose of the program, administered by the BIA, is to provide financial assistance for maintaining dependent, neglected, and handicapped Indian children in foster homes and non-medical institutions where such care is not available from State or local public child welfare agencies. BIA child welfare services thus are "residual" services: to be provided only when the primary (i.e., public) service system is not adequate. Because State services to Indian populations have been uneven from state to state, BIA child welfare programs have been more prevalent in some parts of the country than in others.

As is true of State-administered child welfare programs, many problems have diluted the effectiveness of BIA programs for Native American children. Some are the same issues that impede State service delivery, including cross-cultural differences compounded by a lack of Native American staff with program planning and delivery responsibilities. Perhaps more fundamental were long-standing BIA policies that "explicitly endorsed assimilation of Indians into the mainstream of American life" (DHEW, 1978, p. 8). Such policies acted to encourage the separation of Indian children from their families and communities and their placement in non-Indian settings. Although such policies have been abolished, resentment of their impact on native families and cultures continues in many communities.

Even after these assimilationist policies were changed, other problems continued to restrict the effectiveness of BIA Indian child welfare programs. Principal among these were a lack of funds and priorities for use of funds that promoted institutional rather than family-based substitute care placements. In Fiscal Year 1976, for example, $8 million was spent on out-of-home care for approximately 3,000 children, with approximately 70 percent of that amount going for institutional care (Children's Defense Fund, 1978, p. 128). Further, the Snyder Act regulations, which were not codified until 1977, gave "little emphasis to reuniting families or otherwise ensuring a child permanence" (Children's Defense Fund, 1978, p. 126).

Functioning within these constraints, BIA child welfare staff typically are also responsible for all other social services delivered by the agency. It is not uncommon for a BIA agency social services staff to consist of one individual--the agency social worker--who, in addition to child welfare, is responsible for the agency's family services and general assistance programs, as well.

Responsibility for child welfare services has been passing from BIA agencies to tribes. Under the mechanism of the "638" contract, established in the Indian Self-Determination and Education Assistance Act of 1975 (P.L. 93-638), responsibility for service delivery is transferred to a qualifying tribe along with a portion of the Snyder Act funds previously used to support the BIA program.

According to a recent preliminary summary of social services delivery information compiled by the BIA Central Office, 25 BIA agencies are still providing child welfare services for the tribe(s) in their areas. For the mail survey described in Part I of this report, 18 BIA agencies were identified by themselves or by the BIA Central Office as operating a child welfare program with children in substitute care. Sixty-nine agencies reported, or were reported as, having either no child welfare program or no children in out-of home care. No information was obtained for five agencies.

To obtain information on BIA child welfare services and the impact of the Indian Child Welfare Act on these services, we visited one BIA agency in each of the four field study states. As with the public and tribal programs, data collection at each site was to include interviews and case record reviews. However, obtaining an adequate number of case records to allow reporting of case record data proved difficult. One site had only four case records available. Staff at another site failed to provide any case records during field staff's scheduled visit. At a third site, access to case records was denied by tribal officials. Attempts to obtain case record data at another site in the same state met with the same result. Therefore, with assistance from BIA Central Office and Billings Area Office staff, we arranged to visit a BIA agency in Montana.

The BIA agencies visited and the tribe(s) in each agency's service area are shown in Table 7-1. Note that in the Anadarko (Oklahoma) Agency's service area, the Apache, Comanche, Kiowa, and Wichita Tribes provide their own child welfare services under 638 contracts. The agency thus performs child welfare functions for the Caddo, Delaware, and Fort Sill Apache Tribes. The Red Lake Tribe, served by the Red Lake (Minnesota) Agency, also operates its own child welfare program.

Information on the interviews and case record reviews completed at each BIA agency site is given in Chapter 4, as are demographic and socioeconomic data on the reservations or trust lands occupied by three tribes who receive child welfare services from BIA agency field sites. The overview of the Red Lake Reservation, which was one of the tribal field study sites, also is presented in Chapter 4.

The issues discussed in this chapter pertain to the current and future delivery of child welfare services to tribes by BIA agencies. Information reported on these issues came from interviews conducted at the field study sites that provide these services. Because the Red Lake Agency no longer provides such services, interview data from that site generally are not incorporated into the discussions that follow. Comments from that agency have been included at appropriate points in previous chapters, however.

Organization of the Chapter

As in the three preceding chapters, information on BIA child welfare services is presented in four sections, namely: BIA Agency Organization for Child Welfare; Staffing and Services of BIA Child Welfare Programs; Substitute Care Casework Practices; and Program Needs. The questions discussed in each section are listed below. Chapter findings are summarized following the list of questions, and the detailed discussion of findings follows the summary.

A. BIA Agency Organization for Child Welfare

1. What are the sources and amounts of funding for BIA child welfare services? For what does each funding source pay?

2. What are the roles and relationships between the tribal court and the BIA child welfare program with respect to child welfare? Who decides whether the tribe will accept or decline jurisdiction over a case of a tribal child involved in a State court custody proceeding?

3. Are tribal court judges who hear BIA child welfare cases paid or voluntary? Full-time or part-time? Lay or professional? Approximately how many child welfare cases do they handle each month? What types of training have they had on the Indian Child Welfare Act?

4. What has been the impact of implementation of the Indian Child Welfare Act on BIA child welfare programs?

Table 7-1

Bureau of Indian Affairs Agency Field Study Sites and Tribes in their Service Areas

BIA Agency	Tribe(s) in Service Area
Anadarko Agency; Anadarko, Oklahoma	* Apache Tribe of Oklahoma Caddo Indian Tribe of Oklahoma * Comanche Indian Tribe of Oklahoma Delaware Tribe of Western Oklahoma Fort Sill Apache Tribe of Oklahoma * Kiowa Indian Tribe of Oklahoma * Wichita Indian Tribe of Oklahoma
Blackfeet Agency; Browning, Montana	Blackfeet Tribe of the Blackfeet Indian Reservation of Montana
Pine Ridge Agency; Pine Ridge, South Dakota	Oglala Sioux Tribe of the Pine Ridge Reservation, South Dakota
Red Lake Agency; Red Lake, Minnesota	* Red Lake Band of Chippewa Indians of the Red Lake Reservation, Minnesota
San Carlos Agency; San Carlos, Arizona	San Carlos Apache Tribe of the San Carlos Reservation of Arizona

*Tribe provides its own child welfare services under 638 contract with BIA.

B. Staffing and Services of BIA Child Welfare Programs

1. What are the staff characteristics of BIA child welfare caseworkers? How large are their caseloads? Where do they turn for training and technical assistance on child welfare issues? What efforts do they make to recruit Indian students for social work education or training?

2. How do BIA child welfare programs handle child abuse and neglect reporting for children living on the reservation? What is their role when they or nearby public agencies receive such reports for children living off of the reservation?

3. What services are provided by BIA child welfare programs for families with children in substitute care? For what services do the programs make referrals? What services do program clients use most often?

4. Are BIA foster homes paid the same rate as homes used by public programs? Do BIA programs have written standards for foster families? What is the experience of tribal programs with regard to recruiting and approving Indian foster families?

5. What is the relationship between the BIA program and the local public child welfare program? Between the BIA program and State courts?

C. Substitute Care Casework Practices

1. What efforts do BIA child welfare programs make to prevent placing children in substitute care?

2. When children must be placed in substitute care, into what types of settings are they placed?

3. What goals for permanency are established for children in out-of-home care?

4. What proportion of children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

5. By whom and how often are cases reviewed?

6. How long do children in the care of BIA child welfare programs remain in substitute care? How many different placements do they have while in care?

7. What are the outcomes for children who leave BIA substitute care?

D. Program Needs

1. In addition to those services already being provided or referred, what other child welfare-related services do clients of BIA child welfare programs need? What needs do BIA officials project for their child welfare programs over the next two years?

2. What modifications do BIA officials suggest to increase the effectiveness of Federal assistance to tribal and BIA child welfare programs?

Summary of Findings

This chapter reports findings from interviews with staff at four Bureau of Indian Affairs agencies that provide child welfare services to tribes, and from data extracted from 35 case records reviewed at three of these agencies. Some of the data obtained from BIA agencies through the nationwide mail survey also are presented. The findings of this chapter are reviewed here.

A. BIA Agency Organization for Child Welfare

Funding for BIA Child Welfare Agencies

Approximately 25 BIA agencies deliver child welfare services to the tribe(s) in their areas. BIA child welfare services are supported by two types of funds available through the Snyder Act of 1921 (Public Law 67-85). Child Welfare Assistance or "2263" funds pay for substitute care placements in foster homes and in non-medical institutions. Administrative or "2266" funds provide salaries, facilities, and other operating expenses for social service programs. At the four programs visited, Child Welfare Assistance funds ranged from $643 to $677,000 (excluding funds designated for a group facility). Two programs reported Administrative funds of $60,000 and $148,000, respectively.

Role of the Tribal Courts

BIA agency programs deliver child welfare services at the direction of the tribal court. Social services staff (often only one individual) typically provide home assessments, recommend for or against removal of children from their homes and suggest treatment plans.

When notified of child custody proceedings pending in a State court, tribal courts generally accept jurisdiction over the case when resources are available for the needs of the child and family. Consequently, some tribes have never or rarely declined jurisdiction in the past few years, which is the case for two of the BIA programs visited, while other tribes, such as a third one visited, have declined more cases than they have accepted.

Role and Training of Tribal Judges

At each of the three tribal courts hearing cases served by the BIA programs, from two to three judges hear BIA child welfare cases. The tribal court judges serve full-time and the Code of Federal Regulations Court judges serve part-time. Of the three judges interviewed, one is a trained attorney and the other two are lay judges. The two full-time judges spend 10 and 50 percent of their time, respectively, on child welfare cases and handle 2 to 3 and 8 to 10 cases each month. All three judges have received training on the Indian Child Welfare Act, but two have participated in several different, more intensive multi-day sessions sponsored by the American Indian Justice Center, the BIA, and state and national judges' associations.

Impact of the Act on BIA Child Welfare Programs

As to the impact of the implementation of the Indian Child Welfare Act on their BIA child welfare program, BIA respondents' opinions differed. Two BIA agency staff felt that caseloads have increased, while two others said there were no major changes in caseload size, staffing patterns, or types of cases. There is an increased need for training on the Act and on child welfare services, and more emphasis on recruitment of foster parents. The requirement to provide technical assistance to tribal Title II programs and the need to coordinate with public child welfare programs have increased demands on agency staff.

B. Staffing and Services of BIA Child Welfare Programs

Staff Characteristics and Caseloads

The number of staff in the four BIA child welfare programs ranges from one to five. Most are Native American. Although they are all full-time employees, they spend only part of their time on child welfare. The average number of child welfare cases across the four programs is 34. Children in out-of-home placements account for between 50 and 100 percent of the total child welfare caseload at each site and number from 2 to 50. All respondents have received training on child welfare issues from BIA Area Office staff. Two also reported training from Three Feathers Associates and the American Indian Justice Center.

Response to Child Abuse and Neglect Reports

Two BIA child welfare programs do not investigate child abuse and neglect reports: one refers them to the local child welfare agency and the other to the tribal court, which has child protection services. The other two BIA programs do investigate abuse and neglect allegations but only on reservation or trust land. Although none of these BIA programs may conduct abuse and neglect investigations outside of Indian lands, they all may assist in these cases.

Services Provided and Referred

All four BIA child welfare programs provide caseworker counseling, financial services, and transportation to families with children in substitute care. Other services offered by one or two of the programs are family counseling, drug or alcoholic treatment, housing assistance, and child care. All four programs refer clients to therapy and other mental health services, substance abuse treatment, physical health services, employment and educational or vocational training services, and parenting classes. Caseworker counseling is used most frequently by clients.

Foster Homes

One of the BIA programs uses primarily State-licensed homes for substitute care placements, although some relative placements are not licensed. The number of Indian foster homes at the other 3 programs ranges from none to

40-45. Two of these three programs have written standards for foster families. In all four sites, BIA foster homes are paid the same rate as those in public programs.

Respondents in three programs reported on the number of Indian foster families, which were 30, 40 to 45, and 0. In the past 2 years, the first agency accepted 15 out of 17 Indian applicants; the second agency, 5 or 6 out of about 40 applicants; and the third agency, 2 out of 3 applicants. The three agencies have found it difficult to recruit Indian foster families for several reasons: lack of staff time and program resources to recruit and train foster parents, unsuitability of applicants' homes or motives, and family resistance to taking on another child or developing an attachment to a foster child who must later be returned home.

BIA Relationships with Public Programs and State Courts

No formal or legal relationships exist between BIA programs and public child welfare agencies. Informal relationships may be established, however, particularly if the local agency is nearby or frequently handles tribal children's cases. For one program the State handles AFDC-eligible cases. Another program coordinates efforts on an as-needed basis. However, in another locale the relationship is strained because of issues related to jurisdiction and responsibility for services. Although State courts cannot direct provision of services by BIA programs, BIA staff sometimes give testimony in or do a home study for a State court.

C. Substitute Care Casework Practices

The practices addressed here are required of public programs under the provisions of P.L. 96-272. While BIA child welfare programs are not bound by that law, the BIA Manual on social services establishes some of the same requirements. Data are based on 35 case records reviewed at three BIA agencies.

- Of the 27 substitute care cases that had been under tribal jurisdication from their inception, 33 percent (N=9) showed documentation of BIA program efforts to prevent placement. These efforts usually took the form of family counseling by a caseworker and referral to mental health services.

- Among the 34 children whose case records identified the child's substitute care setting, 29 percent were placed with relatives and 53 percent were placed in non-relative foster homes, 56 percent of which were Indian. The mail survey of BIA child welfare programs shows considerably fewer children in foster homes (58 percent) and slightly fewer in group facilities (12 percent vs. 18 percent in the field study).

- Of the 19 children for whom a case goal was identified, 58 percent have a goal directed toward family-based permanency (return home--26 percent; place with relatives--11 percent; and adoption--21 percent). In the mail survey, 45 percent of the children had the same goals (26 percent, 15 percent, and 4 percent, respectively). However, the goal could not be determined for 44 percent of the field study cases, which makes any comparisons tentative.

- Written case plans could be identified in only 23 percent of the records; none of the plans was signed by the parent.
- Voluntary placements occurred in only two cases (6 percent). Neither case record included a written agreement with the parent.
- Among the 22 records with information on the last agency or judicial review, 55 percent had been reviewed within the last 6 months, almost always by the tribal court. Average elapsed time since the last review was 9.8 months.
- Length of time in BIA care is shown below for cases in the mail survey (all of which were open) and for open and closed field study cases with time-in-care information available.

	Mail Survey (Open Cases) (N = 692)	Field Study Open Cases (N = 19)	Field Study Closed Cases (N = 13)
Less than 6 months	11%	21%	31%
6-11 months	8%	5%	31%
12-23 months	6%	21%	15%
2 years or more	76%	53%	23%

Children in the care of BIA programs are in substitute care substantially longer than children in the care of public, tribal, and off-reservation programs.

- Average length of time in care for closed cases is shorter than that for open cases (47 vs. 57 months), as has been seen in the other programs.
- Outcome data for 14 of the 16 closed cases show that 42 percent of the children were discharged to families (returned home and placed with relatives, each 21 percent; adopted--0 percent). Nationally, 72 percent of the children discharged from BIA substitute care went into a family-based setting (64 percent, 7 percent, and 1 percent, respectively).
- Because no children in the BIA study sites had been adopted, the use of adoption subsidies was not examined.

D. Program Needs

Needed Resources and Reallocations of Duties

Respondents identified several areas in which their child welfare programs have needs. All four specified the need for more child welfare staff, especially trained professionals, to improve case planning and enable work with more families. Additional services, such as preventive services, therapeutic services, adolescent services, family-based services, and more foster homes and emergency shelters, were named to help fill gaps in service delivery.

Changes in functional responsibilities are needed to fulfill duties related to administrative and/or fiscal matters as distinct from those related to direct services. According to one respondent, the General Assistance program that pays cash assistance grants to families should be split from child welfare services, while a second individual said that increased reporting and budget work demands a branch manager with different functions from a social worker. Other areas of need involve the provision of training and technical assistance to tribes, improvement in the function of and relationship with the tribal court, and development of a consensus among tribal legal systems about bi-tribal children and jurisdictional issues.

Modifications Suggested to Increase the Effectiveness of Federal Assistance

Title II funding for tribal child welfare services should be increased, said two respondents, and competition for funds eliminated, according to a third. Each tribe should have stable funding for services. In addition, standards for tribes, like those for States, are needed to protect the rights of children and their parents.

All four administrators indicated a need in their own programs for increased funding, primarily to add staff. Whether in the administrative or service area, additional staff support would result in improved service delivery to clients.

Detailed Discussion of Findings

The preceding section of this chapter presented a summary of the findings of this study relative to BIA agency child welfare services. A detailed presentation of these findings comprises the remainder of the chapter.

A. BIA Agency Organization for Child Welfare

This first section provides information on the operating context of BIA child welfare programs. Described are funding sources, the relationship between BIA programs and tribal courts, and characteristics of tribal court judges who hear BIA-served cases. Presented last are respondents' perceptions of the Indian Child Welfare Act's impact on their programs.

1. What are the sources and amounts of funding for BIA child welfare services? For what does each funding source pay?

In BIA agencies that provide them, child welfare services are part of the responsibilities of the social services staff. Other duties include operation of the BIA's General Assistance program, and management and recordkeeping of Individual Indian Money (IIM) accounts, which hold in trust the value of and income derived from former tribal lands that have been deeded to individuals.

The Snyder Act established several types of funds to support the delivery of services by the BIA to persons enrolled in Federally recognized Indian tribes. Two types of Snyder Act funds support BIA child welfare programs: administrative or "2266" funds, which pay for salaries, facilities, and other operating expenses for social services programs; and Child Welfare Assistance or "2263" funds, which pay for substitute care placements in foster homes and non-medical institutions. General Assistance funds, which also come from the Snyder Act, provide cash assistance grants for families that are similar to AFDC (Aid for Families with Dependent Children) payments.

Table 7-2 displays the amounts of Child Welfare Assistance funds supporting substitute care placements for the four BIA child welfare programs in the field study, and the Administrative funds provided to two of the four. Note that the amounts reported for Administration support the entire social services program, not only child welfare. General Assistance funds are not shown because they do not support child welfare services.

2. What are the roles of and relationships between the tribal court and the BIA child welfare program with respect to child welfare? Who decides whether the tribe will accept or decline jurisdiction over the case of a tribal child involved in a State court custody proceeding?

BIA agency programs deliver child welfare services at the direction of the tribal court. Social services staff provide home assessments, make

Table 7-2

1986-87 Funding for Bureau of Indian Affairs Child Welfare Programs

Funding Source	Program A	Program B	Program C	Program D
Snyder Act Child Welfare Assistance Funds	$110,000	$ 643	$150,000	$927,000(2)
Snyder Act Administrative Funds(1)	not reported	$ 59,874	$147,800	not reported

(1) Administrative funds support the operation of all social services programs, not just child welfare.

(2) Includes $250,000 for operation of a youth home.

recommendations to the court regarding removal of children from their homes, and recommend treatment plans and followup actions. The court can direct the program to provide whatever services it deems appropriate that fall within the scope of the program's responsibilities.

In at least one of the sites we visited, BIA personnel feel that the tribal court lacks established procedures and that this affects the working relationships between the court and the BIA program. "It can be difficult," one respondent said. "There is not a formal referral system. No reports are received. They do not have a system for a hearing. We are never asked to do a case assessment or give a report to the court. There is a very lax system. Charges are not filed formally for neglect. You never know why you have been subpoenaed."

In the issue of jurisdiction over child welfare cases, the relationship is between the tribe and the State court; the BIA agency is not a party in the decision. Thus, when a tribe that receives child welfare services from the BIA is notified that one of its children is involved in custody proceedings in a State court, it is the tribal court that decides whether or not to accept jurisdiction. A more complete discussion of this process was presented in Chapter 6. The frequency with which tribes decline jurisdiction varies among the BIA programs visited. The BIA respondent at one site could "not recall a case of the tribe declining jurisdiction" during the past few years, and at a second program the respondent reported that the tribe had declined jurisdiction over only one child in the preceding two years. In contrast, another tribe served by a BIA program has "declined more [cases] than have been accepted."

One BIA respondent discussed situations in which transfer of jurisdiction is declined. "Tribes will not accept jurisdiction if they feel they don't have the resources to provide for the family. If [the public agency] can provide [the needed services], in some cases jurisdiction will remain with [the public agency]."

3. **Are tribal court judges who hear BIA child welfare cases paid or volunteer? Full-time or part-time? Lay or professional? Approximately how many child welfare cases do they handle each month? What types of training have they received on the Indian Child Welfare Act?**

Two tribal courts and one Code of Federal Regulations (CFR) Court where judges hear child welfare cases served by BIA child welfare programs were visited. At one of the two tribal courts--that of the Oglala Sioux (Pine Ridge Reservation)--judges also hear cases under the supervision of the public child welfare program located on the reservation. Judges serving the CFR Court also hear cases under the supervision of tribal child welfare programs. Either two or three judges hear the cases at each of these courts. The judges are full-time at the tribal courts and part-time at the CFR Court.

We interviewed one judge at each court. All three hold paid, rather than voluntary, positions. Two are lay judges; the third is a trained attorney. The full-time judges estimate that they spend approximately 10 and 50 percent of their time, respectively, on child welfare cases, and handle 2 to 3 and 8 to 10 such cases each month. The part-time judge, who spends 70 to 80 hours per month serving as a judge, estimated spending two-thirds of that time on child welfare cases and hearing 55 to 60 such cases in a month.

All three judges have attended conferences or training programs on the Indian Child Welfare Act. One had attended a 1980 conference. A second had attended three 2-day programs in 1986-87--one conducted by the American Indian Justice Center, one by the American Indian Institute at a state university, and one by the BIA. The third judge had participated in a 5-day program by the American Indian Justice Center, 2-day sessions by the state judges association and the BIA, and another program by a national Indian judges association.

4. What has been the impact of implementation of the Indian Child Welfare Act on BIA child welfare programs?

Respondents at the visited BIA agencies that provide child welfare services were divided in their assessments of whether or not the Indian Child Welfare Act has had much impact on their programs. When asked to identify any such impacts, all four raised the issue of caseload size; however, two said the caseload has increased as a result of the Act and the other two said there has been little impact on the caseload.

One respondent said that the program now handles child welfare cases that it didn't before. This has resulted in a greater need for training about the Act and about child welfare services, and in an emphasis on searching for foster homes. Also affecting the program are the requirement to give technical assistance to tribal Title II programs and the need to coordinate with the public child welfare program.

Another respondent noted that, "We are having trouble with tribal social services. The tribes will only serve their own tribal members. This is a problem with clients [whose bloodlines link them with] more than one tribe."

Identifying situations that have not changed because of the Act, one respondent named not only the caseload but also the staffing pattern and the types of cases. Another said that, "Except for referrals from tribes and the State, there have not been any major changes."

B. Staffing and Services of BIA Child Welfare Programs

In this section, attention turns to service delivery staff and resources available to clients. Specific topics include staff characteristics and training, procedures for investigating reports of abuse or neglect, child welfare services provided to families and children, availability and recruitment of Indian foster homes, and relationships with public child welfare agencies and State courts.

1. **What are the staff characteristics of BIA child welfare caseworkers? How large are their caseloads? Where do they turn for training and technical assistance on child welfare issues? What efforts do they make to recruit Indian students for social work education or training?**

Two of the BIA programs studied have one social service worker each, one program has three, and one has five. Three of the four programs provided data on these service delivery personnel, summarized in Table 7-3. Of the five BIA staff members represented in the table, four are Native American; one has a degree in social work. Among them they have child welfare experience averaging 9.2 years with a median of 8 years. All are full-time employees of their respective agencies, although most spend only part of their time on child welfare and the rest of their time on other social service responsibilities. In the 12 months preceding the site visit, a caseworker had left one of the four programs; the other programs had lost no staff during that time.

The respondents reported the average number of child welfare cases per worker to be 30, 3, 20, and 45 to 50, respectively. (Recall that most or all of these workers are serving other types of cases as well.) The reported number of child welfare cases per program, including protective services, substitute care and aftercare cases, ranges from 4 to 81 and averages 34. Children in out-of-home placements account for between 50 and 100 percent of the total child welfare caseload at each site and number from 2 to 50.

At all four agencies, child welfare respondents said they obtain training and technical assistance on child welfare issues from their respective BIA Area Offices. Two named Three Feathers Associates and the American Indian Justice Center as additional sources of assistance, and one said the local public child welfare program also provides information.

Respondents indicated that their programs do not attempt to recruit Native Americans for social work education or training. One said that recruitment is done by the BIA Area Office. Another responded that there is "no time for it, [although we] would like to have field practicum students from the school of social work."

2. **How do BIA child welfare programs handle child abuse and neglect reporting for children living on the reservation? What is their role when they or nearby public agencies receive such reports for children living off of the reservation?**

(The reader should note that, in May 1987, the BIA and the Indian Health Service jointly implemented new child protection team guidelines governing casefinding, reporting, and data collection procedures in child abuse and neglect cases. The information presented here does not reflect the impact of those guidelines.)

The Pine Ridge (South Dakota) and San Carlos (Arizona) BIA Agencies are not responsible for investigations of child abuse and neglect reports. On the Pine Ridge reservation, such reports are referred to the local public child welfare agency, which is responsible for the investigations. At San Carlos,

Table 7-3

Child Welfare Staff Characteristics of Bureau of Indian Affairs Child Welfare Programs

	Program A (N=1)	Program B (N=1)	Program C (N=3)	Program D (N=5)
Race/Ethnicity	%	%	%	
Native-American	100.0	100.0	66.7	Data not provided.
White	0	0	33.3	
Education	%	%	%	
Master's, non-social work	100.0	0	0	
Bachelor's, social work	0	0	33.3	
Bachelor's, non-social work	0	100.0	33.3	
Some college, non-social work	0	0	33.3	
Child Welfare Experience	years	years	years	
Mean*	8.0	4.0	11.3	
Median*	8.0	4.0	10.0	
Employment Status	%	%	%	%
Full-time#	100.0	100.0	100.0	100.0
Part-time	0	0	0	0

*Means and medians are based on workers for whom data were reported and are approximations. They probably underestimate the true numbers somewhat because years of experience usually are rounded down in reporting. Persons with between 5 and 6 years of experience, for example, probably were reported as having 5 years of experience.

#While all staff work full-time, most or all have only part-time child welfare responsibilities.

the tribal court has a child protection services unit that handles the investigations.

For the other two BIA agencies, authority to investigate abuse and neglect allegations does not extend beyond reservation or trust land. Staff at the Blackfeet (Montana) Agency follow standard child welfare investigation procedures when such reports are received: they interview parents, make recommendations to the court (i.e., the tribal court) concerning needed actions, and if necessary, develop a case plan for the family.

Before the Anadarko Agency investigates an abuse or neglect report, it must determine if the case falls within its jurisdiction. This requires identifying both the family's tribal affiliation and whether the family's residence is on tribal trust land. If the family's tribe operates its own child welfare program, then the BIA Agency refers the report to the tribe. If the family does not live on tribal trust land, then the case falls under the jurisdiction of the State and is referred to the public child welfare agency. If the family lives on trust land and is a member of a tribe for which the Anadarko Agency provides child welfare services, then the BIA staff follow standard investigation procedures.

Although none of the BIA Agencies has authority to conduct abuse and neglect investigations outside of Indian lands, all may assist in such cases. This may include identifying tribal ties to facilitate tribal notification and helping to locate family members for relative placements. One respondent said that, "At times we are asked to accompany [public agency] workers on investigations and home visits with Indian families."

3. What services are provided by BIA child welfare programs for families with children in substitute care? For what services do the programs make referrals? What services do program clients use most often?

Child welfare respondents at the four agencies were asked which of 18 services frequently needed by families with children in substitute care are provided by their programs, which are offered through referral, and which are used most often. Their responses, which are summarized in Table 7-4, suggest that BIA programs rely primarily on referral mechanisms to meet child and family needs.

Direct services by BIA child welfare programs are limited. All four programs provide counseling by a caseworker, financial services, and transportation. Two programs offer family counseling, and drug or alcohol treatment, housing assistance, and child care are provided by one program each. Three of the four respondents named one additional service each--listed at the bottom of the table--that is provided directly by the program.

By referral, all four programs link clients to therapy and other mental health services, substance abuse treatment, physical health services, employment and educational or vocational training services, and parenting classes. Three of the four make referrals for housing assistance. Clients are referred to seven services--caseworker and family counseling, legal

Table 7-4

Services for Clients of Bureau of Indian Affairs Child Welfare Programs

Service	Number of Programs that Provide Service Directly	Number of Programs that Provide Referral for Service	Number of Programs where Service is One Most Used by Clients
Therapy from a psychologist/ other mental health services		4	1
Caseworker counseling	4	2	3
Family counseling	2	2	
Drug or alcohol treatment	1	4	
Physical health services		4	1
Financial services	4	1	1
Housing assistance	1	3	
Employment services		4	
Educational or vocational training		4	1
Legal services		2	
Homemaker services		1	
Food bank		2	
Parenting classes		4	
Child care	1	2	
Early childhood programs		2	
Parent, teen or adult support groups		2	
Transportation	4	1	1
Youth activities		1	

Others mentioned as provided:

- Boarding schools
- Home visits
- Individual Indian Account management for children in institutional care

services, a food bank, child care, early childhood programs, and support groups--by two programs each.

With the exception of caseworker counseling, which is used frequently by clients at three of the four sites, different services are in great demand at different programs. Mental health and physical health services, financial services, educational or vocational training, and transportation are high-demand services in one program each.

4. Do BIA programs have written standards for foster families? What is the experience of tribal programs with regard to recruiting and approving Indian foster families? Are BIA foster homes paid the same rate as homes used by public programs?

Of the four BIA field study sites that provide child welfare services, one uses State-licensed homes for substitute care placements. In that site, "some relative placements are not licensed," but the agency apparently has approved the homes so that BIA will pay for the placements.

At two of the other three sites, respondents said the agency has written standards for foster families. One stated that, "Guidelines are in the BIA social services manual," while the other said the standards for that agency were "modeled after [the public agency's standards]; we used what works for them." The respondent at the third site said the agency does not have written standards for foster families.

These three respondents also reported that their agencies have, respectively, 30, 40 to 45, and no Indian foster homes. The first had had 17 Indian families apply to be foster homes in the preceding 2 years and had accepted 15 of them. The other two families were not accepted because they did not proceed to get the training required for licensing. At the second site, approximately 40 families had applied and 5 or 6 had been accepted. Others were not accepted because they were not needed at the time. The agency reporting no Indian foster homes had had three applicants and had accepted two in the preceding 2 years. The third family had withdrawn its application after being accepted and so the followup processing was not completed.

Respondents at all three agencies reported that it has been difficult to recruit Indian foster parents. When asked why, one or another respondent named the following hindrances.

- Time and resources are not available to recruit and train foster parents.
- Alcoholism is so prevalent that [acceptable] homes are hard to find.
- Some families appear to provide care for the money.
- Indian families are resistant because of the attachment to a child that develops.

- Families are reluctant because of the added burden on the family. Sometimes they feel they have enough to take care of.

- "We don't have a choice. We use the homes we know and certify homes when we have a child to place. There is no consistency in recruitment, placement and recertification [procedures]. The judge was placing [children first] and then asking for certification."

At all four BIA agencies, respondents reported that the foster families with which they place children are paid the same rate as foster families for the public agencies in their vicinity.

5. What is the relationship between the BIA program and the local public child welfare program? Between the BIA program and State courts?

BIA programs have no formal or legal relationship with public child welfare agencies. Informal relationships may be established, however, particularly if a local public agency is located near the reservation or if it frequently handles cases involving tribal children. A BIA agency social worker interviewed at one of the programs visited said the relationship between that program and the local public agency is "very good--the best or among the best in the state. We have been working on the relationship for 8 years. The State currently handles all AFDC-eligible cases." At another BIA program, the respondent said, "We coordinate efforts on an as-needed basis. There are no formal agreements, but a good working relationship."

In another locale, the relationship does not appear to be so positive. The BIA worker feels that "the State should provide the bulk of services due to resource availability. The relationship is strained because of jurisdiction and responsibility issues."

Although State courts cannot direct the provision of services by BIA programs, some of the BIA staff interviewed have had dealings with State courts. For example, one respondent said, "We sometimes respond to give testimony in State court jurisdiction cases." Another noted, "If a case [in the State court] involved [tribal] children, we might be involved. If the State court had a child off reservation, we would do a home study for the court if [the home] was on the reservation." One respondent described negative experiences with the State court in a nearby jurisdiction. "Probation officers in one county would pick up kids and take them to the reservation and dump them, or the court would adjudicate and place a child and expect the BIA agency to pay."

C. Substitute Care Casework Practices

In this section we present data on substitute care case planning and management practices of Bureau of Indian Affairs child welfare programs. These data come from 35 case records reviewed at 3 BIA programs. (As explained in the introduction to this chapter, no case records could be reviewed at two of the five BIA sites visited for the field study.) Background data on these cases was presented in Chapter 4. All of the children were under tribal, rather than State, jurisdiction. As in earlier chapters, the reader should keep in mind that these case records were not sampled randomly; the data therefore are indicative rather than conclusive.

The practices addressed here are mandatory for public programs under the provisions of the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272). BIA agencies are not bound by that law in their delivery of child welfare services. Agency performance relative to these practices is discussed here because they represent generally accepted standards of good casework. It should be noted, however, that the chapter of the BIA Manual that addresses social services (66 BIAM 10) establishes some of the same requirements, including placement in the least restrictive setting that most approximates a family, development of a written case plan that the client is requested to sign, and documentation of pre-placement services provided.

1. What efforts do BIA child welfare programs make to prevent placing children in substitute care?

Of the 35 case records we reviewed, 27 were for children who had been under tribal jurisdiction from the inception of the case, 7 were for children whose cases had been transferred from State to tribal jurisdiction, and 1 was for a case in which the initial jurisdiction could not be determined. Among the 27 cases that had begun under tribal jurisdiction, case records documented BIA agency efforts to prevent substitute care placement in 9, or 33 percent. Family counseling by a caseworker was the most frequent preventive service, delivered in six of the nine cases, and referrals to mental health services were made for four cases. Preventive efforts made in one case each were referral for chemical dependency treatment, a family conference involving tribal social services and mental health staff, and cooperative efforts with the local public child welfare program to redirect the child.

2. When children must be placed in substitute care, into what types of settings are they placed?

In the nationwide survey of child welfare programs reported in Part I, 16 BIA agencies--including the 3 from which case record data were collected for the field study--provided information on the substitute care settings of the children in their charge. Overall, 58 percent of these children were in foster homes, 12 percent were in group facilities, and the other 30 percent were in other types of settings (see Chapter 3, Table 3-8).

At the three BIA agencies where case records were reviewed, the child's substitute care setting could be determined for 34 of the 35 reviewed cases. (Specifically, the current setting was recorded for cases still open when data were collected and the setting prior to discharge was recorded for cases that had been closed.) Of those 34 children, 29 percent were placed with relatives, 53 percent were in non-related foster homes, 6 percent were in group homes, 3 percent were in a child care institution and 9 percent were in residential treatment facilities. Of those in foster homes with non-relatives, 56 percent were living with members of their own tribe, 6 percent (i.e., 1 child) with a white family, and 39 percent with families whose race was not indicated in the case record.

Site-by-site data on substitute care settings are displayed in Table 7-5. At one program, all four children whose records were reviewed were in relative placements. Among cases reviewed at the other two programs, over half of the children were in unrelated foster homes, one fifth were with relatives, and the others were in group settings.

The respondents at these three programs and at the San Carlos Agency were asked if BIA boarding schools ever are used as substitute care placements. Two said "Yes" and the other two said "No."

3. What goals for permanency are established for children in out-of-home care?

In the nationwide mail survey, 45 percent of children in BIA care had a case goal of some type of family-based permanency: returning home was the goal for 26 percent, placement with relatives for 15 percent, and adoption for 4 percent. For 38 percent of the children the goal was emancipation or long-term foster care, while no goal had been established for 16 percent (Chapter 3, Table 3-10).

Of 35 BIA-served cases reviewed for the field study, no case goal could be identified for 46 percent. Among the remaining 16 cases, 58 percent had a goal of some sort of family-based permanency: 26 percent to be reunified with their original caregiver, 11 percent to be placed with relatives, and 21 percent to be adopted. These figures make it appear that the BIA cases reviewed were more likely to have family-oriented goals than the BIA cases represented in the mail survey. However, if cases for which the case goal could not be determined are included in the calculations for the field study data as they are for the survey data, then the percentage of children with family-based goals drops to 31: 14 percent to return home, 6 percent to be placed with relatives, 11 percent to be adopted.

At the individual sites, as shown in Table 7-6, the programs were striving for family-based permanency for between one-quarter and three-quarters of the reviewed cases. Independent living or long-term care was the goal for one-quarter of reviewed cases at two programs, but neither of these goals was found in cases reviewed at the third site. The proportion of cases at each site for which case goals could not be determined ranged from one-quarter to one-half.

4. What proportion of children in substitute care have written case plans? How frequently are case plans signed by the parents? Among cases in which parents have placed children in care voluntarily, for what proportion is there a written voluntary placement agreement between the parent and the child welfare program?

Table 7-5

Substitute Care Settings of Children in Bureau of Indian Affairs Child Welfare Programs

Substitute Care Setting	Program A (N=4)	Program B (N=15)	Program C (N=16)
	%	%	%
Foster Home--Relative	100.0	20.0	18.8
Foster Home--Unrelated	0	60.0	56.3
Group Home	0	6.7	6.3
Child Care Institution	0	0	6.3
Residential Treatment Facility	0	13.3	6.3
Unable to Determine	0	0	6.3

Table 7-6

Case Goals for Children in Bureau of Indian Affairs Child Welfare Programs

Case Goal	Program A (N=4)	Program B (N=15)	Program C (N=16)
	%	%	%
Return Home	75.0	6.7	6.3
Placement with Relative	0	6.7	6.3
Adoption	0	13.3	12.5
Long-term Foster Care	0	20.0	18.8
Independent Living or Emancipation	0	6.7	6.3
Unable to Determine	25.0	46.7	50.0

Based on the 35 case records reviewed for the field study, it appears that the use of written case plans for children in BIA substitute care is limited, and that parents are not asked to sign the plans that are developed. None of the reviewed case records contained signed case plans, but 23 percent contained unsigned case plans. Apparently no case plan had been developed for 60 percent of the cases, while for 17 percent the reviewers could not determine if there was a plan or not.

Data on written case plans at each program are presented in Table 7-7. The proportion of cases with unsigned case plans ranges from 19 to 50 percent, while the proportion of cases in which there apparently was no written case plan ranges from one-half to nearly three-quarters.

Table 7-7 also reveals that voluntary placements are infrequent. Only 2 such cases were encountered among the 35 cases reviewed. No written voluntary placement agreement was found in the record of either case.

5. By whom and how often are cases reviewed?

Based on a combination of interview and case record data, it appears that substitute care cases receive periodic court reviews at all four visited BIA agencies that provide child welfare services. Interestingly, respondents at two of the four programs failed to mention judicial reviews when asked what types of case reviews are performed. Both of these respondents identified supervisory reviews, which occur quarterly at one program and semi-annually at the other. At the first program, quarterly reviews by the BIA Area Office were named as a second type of review, while at the second, semi-annual reviews also are performed by caseworkers.

The 35 reviewed case records were examined for documentation of the most recent case review. (For cases that had been closed prior to the day of data collection, the last review prior to the court action discharging the child was sought.) The most recent review date was identified for 22 of the 35 cases, or 63 percent. As has been noted in earlier chapters, child welfare case records do not always contain complete documentation of case reviews. This tends to be true especially of non-court reviews. Therefore, the data reported here probably are influenced by the diligence of individual workers and programs in noting reviews in case records.

Among the 22 cases for which case review data were obtained, the average time since the last review was 9.8 months. The data show that 55 percent had been reviewed within the preceding 6 months, 14 percent had been reviewed 6 to 11 months earlier, and 32 percent had not been reviewed for 12 months or more. In 20 cases (91 percent), the most recent review had been conducted by the court.

Table 7-8 reveals that the percentage of cases at each program that had been reviewed within the preceding 6 months ranges from 19 to 50 percent. At two sites, one-fifth and one-quarter of reviewed cases, respectively, had not been reviewed for a year or more. The average time since the most recent review at each site (for those cases in which the most recent review could be

Table 7-7

Prevalence of Written Case Plans and Voluntary Placement Agreements for Children in Bureau of Indian Affairs Child Welfare Programs

	Program A (N=4)	Program B (N=15)	Program C (N=16)
Presence of Written Case Plan in File	%	%	%
Plan Present, Signed by Parent	0	0	0
Plan Present, Not Signed	50.0	20.0	18.8
No Plan	50.0	73.3	50.0
Unable to Determine	0	6.7	31.3
Voluntary Placements			
Number of Voluntary Placements	0	0	2
Percent with Written Voluntary Placement Agreement Present in File	-	-	0

Table 7-8

Elapsed Time Between Most Recent Case Review and Data Collection Date (open cases) or Date of Case Closing (closed cases) for Bureau of Indian Affairs Child Welfare Programs

Elapsed Time	Program A (N=4)	Program B (N=15)	Program C (N=16)
	%	%	%
Less than 1 Month	25.0	20.0	0
1 to 2 Months	25.0	13.3	12.5
3 to 5 Months	0	13.3	6.3
6 to 11 Months	0	0	18.8
12 Months or More	0	20.0	25.0
Unable to Determine	50.0	33.3	37.5
Average (in months)	0.9	10.8	10.5

identified) ranges from less than a month to nearly 11 months. The case review history could not be determined for between one-third and one-half of the cases at each site.

6. **How long do children in the care of BIA child welfare programs remain in substitute care? How many different placements do they have while in care?**

As reported in Chapter 3, data from the nationwide mail survey indicate that, as a group, children in BIA substitute care are in care substantially longer than children in public, tribal and off-reservation programs (Table 3-7). Survey findings show that 11 percent of those in BIA care had been in care less than 6 months, 8 percent had been in care for 6 to 11 months, 6 percent had been in care for 1 to 2 years, and 76 percent had been in care for 2 years or more.

At the BIA sites where case records were reviewed, the overall data show smaller percentages of children in care for longer periods of time than were reported for BIA programs in the nationwide survey. Among the 19 children whose cases remained open at the time of data collection, 21 percent had been in care for less than 6 months, 5 percent had been in care for 6 to 11 months, 21 percent had been in care for 1 to 2 years, and 53 percent had been in care for 2 or more years. The average time in care for these 19 children is 57 months.

Although the overall data for these three programs are more encouraging than the survey data, the individual programs vary widely in the proportions of children who have spent different amounts of time in substitute care. As Table 7-9 shows, all of the reviewed cases in one program and 63 percent of cases in a second have been open for less than 2 years, while two-thirds of the children whose cases were reviewed at the third site have been in care for 5 years or longer. The average time in care at these agencies ranges from 11 months to 5.5 years.

Data on the length of time in care also were sought for the 16 cases that were closed prior to the site visits. Of the 13 case records providing this information, 31 percent had been open for 6 months or less before the child was discharged, another 31 percent had been open for 6 to 11 months, 15 percent had been open for 1 to 2 years, and 23 percent had been open for 5 years or more. The average amount of time these 13 children had spent in substitute care was 47 months.

Time-in-care data for closed cases reviewed at each site are displayed in the lower half of Table 7-9. Both reviewed cases at one site and two-thirds of reviewed cases at a second site had been open for less than a year. At the third site, half of the reviewed cases had been open for less than 2 years while 38 percent had been open for 5 years or more. The average duration of cases was 6 months in one site, 7 months in the second, and 81 months in the third. The latter figure is so high because it includes two cases of children who were taken into care at a young age, placed with relatives, and emancipated approximately 19 years later.

Table 7-9

Length of Time in Substitute Care for Children in Bureau of Indian Affairs Child Welfare Programs

Time in Care	Program A	Program B	Program C
		Open Cases	
	(N=2)	(N=9)	(N=8)
	%	%	%
Less than 6 Months	50.0	0	37.5
6 to 11 Months	0	0	12.5
12 to 23 Months	50.0	22.2	12.5
24 to 35 Months	0	0	0
36 to 59 Months	0	11.1	12.5
60 Months or Longer	0	66.7	25.0
Unable to Determine	0	0	0
Average (in months)	11.0	65.5	58.9
(Overall average: 57 months)			
		Closed Cases	
	(N=2)	(N=6)	(N=8)
	%	%	%
Less than 6 Months	50.0	16.6	25.0
6 to 11 Months	50.0	50.0	0
12 to 23 Months	0	0	25.0
24 to 35 Months	0	0	0
36 to 59 Months	0	0	0
60 Months or Longer	0	0	37.5
Unable to Determine	0	33.3	12.5
Average (in months)	5.9	6.8	81.1
(Overall average: 47 months)			

As with public and tribal programs reported in the preceding chapters, the time in care in the BIA programs tends to be shorter for closed cases than for cases that are still open. As explained in those chapters, this is a common finding in child welfare cases. Open cases more often are those in which permanency is difficult to achieve, so they remain open for longer periods, whereas closed cases more often are those in which permanency was less difficult to achieve and which thus could be closed more quickly. In the public and tribal programs, the distributions of case goals among open and closed cases suggests that this dynamic is largely responsible for the time-in-care differences observed.

The same dynamic probably is operating in the BIA programs, but the data are insufficient to support any conclusion. Among the open cases, 26 percent had a goal of reunification or relative placement while 42 percent had a goal of long-term care or independent living--findings suggestive of the pattern just described. Unfortunately, case goals could not be identified for 14 of the 16 closed cases, making a comparison with goals for open cases impossible. The outcomes for the closed cases, which are discussed more fully in response to the next research question, also conform weakly to pattern described above in that a larger percentage of children were returned home or placed with relatives (42 percent) than were emancipated (36 percent). However, the differences between the open case goals and closed case outcomes are not as pronounced as the differences found in the public and tribal programs. Obviously, the two children who had "aged out" of one BIA program after 19 years in care affect the average time in care for closed cases significantly, both for that program and for the 3-program total.

In 32 of the 35 case records reviewed at BIA programs, the information found was sufficient to determine the number of different settings in which the child had been placed since being removed from the home. Forty-four percent had lived in the same place throughout this substitute care experience, 28 percent had lived in two different settings, 19 percent had had three placements, and 9 percent had lived in four or more settings.

7. What are the outcomes for children who leave BIA substitute care?

In the nationwide mail survey, BIA agencies reported that 72 percent of children discharged from substitute care had been placed in a family-based situation: 64 percent were returned to their homes, 7 percent were placed with relatives, and 1 percent were adopted. Fourteen percent of discharged children had been emancipated upon reaching the age of majority. The outcome was unknown for 10 percent, and the remaining children had various other outcomes (see Chapter 3, Table 3-17).

Of the 16 closed cases reviewed at the 3 BIA field study sites, case outcomes could be determined for 14. Among these, 42 percent of children had been discharged to families: 21 percent were returned home and 21 percent were placed with relatives. In addition, 36 percent had been emancipated upon reaching the age of majority and 21 percent had experienced other outcomes.

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Data for individual programs are presented in Table 7-10. Because of the small numbers involved at each site, the percentages may be misleading upon first inspection. In fact, one child had been returned home and one child had been placed with relatives at each of the three programs. A total of five children had been emancipated--one at one program and four at another.

None of the discharged children from the BIA sites had been adopted, and only 1 percent of discharges reported by BIA agencies in the nationwide survey were to adoptive placements. These data reflect the fact that BIA child welfare programs do not pursue adoption as an option for children in substitute care. Therefore, the question of adoption subsidies raised in the preceding two chapters is not germane to BIA programs.

D. Program Needs

The final section of this chapter reports respondents' comments about the needs of their child welfare programs. This includes needed services, other programmatic issues, and modifications in Federal assistance mechanisms for both BIA agencies and tribes.

1. In addition to those services already being provided or referred, what other child welfare-related services do clients of BIA child welfare programs need? What needs do BIA officials project for their child welfare programs over the next 2 years?

When asked about services needed by program clients, one respondent expressed the need for more foster homes. In addition, the following services each were named by one respondent as needed by but not available to BIA child welfare clients.

- Homemaker services.
- Parenting education, with leverage to require attendance.
- Therapeutic services.
- Family outpatient and inpatient alcohol treatment.
- Emergency shelter care.

When asked to describe the needs of their child welfare programs over the next 2 years, respondents pinpointed several issues. All four specified the need for more child welfare staff "so that adequate case planning can take place." Comments in two cases emphasized the desire for trained staff. Said one, "We need several trained social workers, or intensive child welfare experience [for current staff]. An MSW in family counseling would be helpful. With more staff we could be more aggressive in reaching out to help families." Another respondent said that the program needs "a mental health staff person" with a level of expertise falling somewhere between the BIA's social work

Table 7-10

Outcomes for Children Discharged from Substitute Care in Bureau of Indian Affairs Child Welfare Programs

Outcome	Program A (N=2)	Program B (N=6)	Program C (N=8)
	%	%	%
Reunified	50.0	16.7	12.5
Placed with Relative	50.0	16.7	12.5
Adopted	0	0	0
Emancipated	0	16.7	50.0
Discharged to Another Agency	0	0	12.5
Other Outcome	0	33.3	0
Unable to Determine	0	16.7	12.5

generalists and the Indian Health Service's clinical-level personnel to provide community-based mental health services. One or another respondent reported the need for case management and time management training for staff, and for clerical assistance.

Non-personnel resources and the expansion of services also are issues. One respondent identified a need for "some resources for adolescent services." A second said that expansion is needed in preventive services and Title XIX (i.e., medical) services for foster care children. A third expressed a need for "additional child welfare funding" and to "establish funding for foster care payments." Also named was a "central registry for referral and follow-up efforts and tracking of Indian child welfare cases."

Two respondents identified the need for changes in functional responsibilities in their agencies. One said, "We really do not have time to provide helping services in our General Assistance program. All we do is dole out money. General Assistance needs to be separated from child welfare services." The second said, "Administration and operation services in the BIA have become so heavy. This takes away from direct services. We need a branch manager to handle these duties. There is a lot of data [i.e., reports] and budget work. Paper work has increased over the years. The duties of social worker and management need to be separated."

Three respondents identified needs that are related to tribes. One noted a need to provide training and technical assistance. Another said the BIA program needs "a tribal court that functions better and works with us within some guidelines." The third respondent offered the more general observation that, "The legal systems of tribes need to meet and come to some consensus between and among tribes, even though cultural differences are present, [regarding matters such as] bi-tribal children and jurisdictional issues.

2. What modifications do BIA officials suggest to increase the effectiveness of Federal assistance to tribal and BIA child welfare programs?

Three respondents commented on changes needed in the Title II funding program for tribal child welfare services. Two identified a need for more funds. "Tribes don't get enough money to do the things that need to be done." Title II "needs more funds so that tribal programs can maintain a constant level and tribes can provide quality programs and maintain quality staff." The third respondent commented on the need to eliminate the competition for Title II funding. "It's unfair to have tribes compete for funding. Each tribe should have stable funding to run child welfare programs." In addition to increased funding, one respondent noted that, "There need to be standards for tribes, similar to [those for] States, that protect children's and parents' rights."

When asked what they would change about funding sources for their own programs, all four respondents said they would increase funds. One said additional funding is needed to add services--a homemaker program, residential treatment, a youth shelter, a juvenile detention center. The other three discussed the need for more funds--one specifically named administrative (that is, Snyder Act 2266) funds--to hire new staff or support current staff more adequately. "If we had more money, a child welfare clerk or full-time Indian child welfare worker could be hired and more services could be provided." Funding "could be more generous in salary support for caseworkers. This could cut down on the number of kids in care. We need adequate social work services."

Chapter 8

Off-Reservation Indian Center Child and Family Service Programs

Although it is commonly believed that most Native Americans live on reservations or other Indian trust lands, the 1980 census found that almost two-thirds (63 percent) of self-identified Native Americans live outside of such areas. This figure stood at only 9.9 percent in 1930 (Bolt, 1987), indicating a dramatic change in the balance of onand off-reservation residence over a 50-year period.

Most of the movement from reservations to cities resulted from lack of economic opportunities on the reservations. The first large wave of migration occurred during World War II, when Indians relocated to take advantage of employment in war industries. The Bureau of Indian Affairs built on this momentum after the war by instituting a relocation program to encourage other reservation residents to move to urban areas and find work. Although this relocation policy has been discontinued, many who left reservations under its auspices remain in urban communities and others have followed as on-reservation job opportunities remain generally scarce.

Today, many "urban Indians" are two or more generations removed from contact with a reservation and are essentially assimilated into the majority culture. Others maintain ties with their tribes and tribal customs, returning to their reservations periodically for important cultural, religious and family celebrations. Still others move back and forth between their reservations and urban settings.

For the latter two groups, off-reservation Indian centers (also called "urban Indian" centers) often are an important resource. Most of these centers have developed through the efforts of Native Americans themselves. A primary impetus for their development was the Office of Economic Opportunity's Community Action Program initiative. Historically, many centers are analogous to the mutual aid societies formed by members of immigrant and migrant groups in the U.S. to help newcomers find housing, jobs and health care, learn the language and rules of the majority culture, and identify other people of similar backgrounds with whom to socialize. Like other mutual aid groups, some off-reservation centers also have served as vehicles for political organization among urban Indians.

The 1976 State-of-the-Field-Study of Indian child welfare by the Denver Research Institute's Center for Social Research and Development found that, with very few exceptions, off-reservation Indian centers played a minimal role in the provision of child welfare services for Indian families. "These Indian centers generally provide information and referral services plus some counseling, but they often lack professionally trained social work staff and rarely have a separate program of child welfare services" (DHEW, 1978, p. 12).

Today, there are approximately 70 off-reservation Indian centers in the U.S., although an exact number is difficult to determine. Many centers include a child and family services component among their service offerings, and the prevalence of trained workers is greater now than a decade ago. Findings from the nationwide survey reported in Part I indicate that about 400 Indian children who are in out-of-home placements are in the care of off-reservation programs (see Chapter 3, Table 3-1). Despite their advances, these programs continue to be an under-utilized resource both for preventing Indian family disruption and for assisting families involved with public and tribal child welfare programs.

Site visit teams for this study went to four off-reservation Indian centers whose programs included a child welfare component funded at least in part by a Title II grant. These centers are:

American Indian Services; Sioux Falls, South Dakota

Indian Health Care Resource Center; Tulsa, Oklahoma

Phoenix Indian Center; Phoenix, Arizona

St. Paul American Indian Center; St. Paul, Minnesota

Most of the information presented in this chapter was obtained through interviews. The respondent for each child and family service program was either the director of the program or the executive director of the off-reservation center. In two sites, both of these officials participated in the interview. Five of the six off-reservation program respondents are Indian.

Organization of the Chapter

Information about child and family service programs of off-reservation Indian centers is presented in three sections. The first gives an overview of center services, including child welfare. The second provides more detailed information on the delivery of child and family services. The third describes the current and future needs of off-reservation child and family service programs. The specific questions addressed in each section of the chapter are listed on the next page. They are followed by a summary of the findings reported in the chapter. The more detailed presentation of findings follows the summary.

Note that questions concerning casework practices are not addressed in this chapter. Only one of the four off-reservation Indian child and family programs visited for the study routinely provides child welfare case management for children in substitute care placements. This is not a sufficiently broad data base to support observations about service delivery practices of off-reservation programs.

A. Organization of Off-Reservation Indian Center Child and Family Service Programs

1. What is the scope of services offered by off-reservation Indian centers? Where do child welfare-related activities fit within the broader scope?

2. What are the sources and amounts of funding for off-reservation Indian child and family service programs? For what does each funding source pay?

3. What impact has implementation of the Indian Child Welfare Act had on off-reservation Indian centers? On Indian children and families?

B. Services and Staffing of Off-Reservation Child and Family Programs

1. What services are provided by the child and family service programs of off-reservation Indian centers? For what services do the programs make referrals? What services do program clients use most often?

2. What role do off-reservation child and family service programs play in the delivery of services to Indian families involved with public or tribal child welfare agencies?

3. What are the characteristics of off-reservation Indian center child and family service workers? How large are their caseloads?

4. Where do staff of off-reservation programs turn for training and technical assistance on the Indian Child Welfare Act and the delivery of child and family services? What efforts do they make to recruit Indian students for social work training?

5. Do off-reservation programs have written standards for foster families? What is the experience of the programs with regard to recruiting and approving Indian foster families?

C. Program Needs

1. In addition to those services already being provided or referred, what other child welfare-related services do clients of off-reservation programs need? What needs do off-reservation Indian center child and family service officials project for their programs over the next two years?

2. What modifications do child and family services staff suggest in the Title II funding program as it affects off-reservation programs?

Summary of Findings

The final chapter in Part II of this report focuses on child and family service programs of off-reservation Indian centers. Their relationship to public and tribal child welfare programs is not defined clearly, but they are recognized in the Indian Child Welfare Act as a link in a comprehensive system of service delivery for Indian children and families. The following summary reviews information obtained at four off-reservation programs.

A. Organization of Off-Reservation Indian Center Child and Family Service Programs

Scope of Services in Off-Reservation Indian Centers

Off-reservation Indian centers in the U.S. provide varied types of assistance to the Indian communities they serve, such as interpreters, information and referral services, clothing banks, and increasingly, more specialized help such as legal aid, health and mental health services, and job training and employment. Very few centers have comprehensive child and family services as their core program; usually this type of service is a component of a larger program in centers that have been successful in obtaining Federal funds.

Funding for Off-Reservation Child and Family Service Programs

Title II of the Indian Child Welfare Act is the most widely used funding source for off-reservation child welfare-related services. All four off-reservation Indian centers in the field study received Title II funds for their 1986-87 program year, which constituted from the fourth to the seventh year of continuous Title II support for these programs. Three also received funds from other sources--the State, for serving as a licensed or certified child-placing agency (Phoenix and St. Paul centers); the Indian Health Service, for defraying some overhead costs and part of the staff salary for the child and family program (Tulsa center); and donations from local organizations (Phoenix and Tulsa centers).

Impact of the ICWA

The most visible impact of the Act on the off-reservation centers is the Title II funding that enabled each to create its child and family services component. One or another of the four program administrators believe that this has resulted in meeting the needs of urban Indians more effectively, creating better relationships with the reservations, and/or increasing the number of clients.

Other impacts of the Act observed by center respondents include reductions in the removal of Indian children from their homes and in the adoption of Indian children by non-Indian families. Further, services by public agencies have increased.

B. Services and Staffing of Off-Reservation Child and Family Programs

Services of Off-Reservation Programs

The off-reservation centers operate multi-purpose family assistance programs. All four programs provide caseworker counseling and parenting classes. Family counseling, financial services, and transportation are offered by three of the four. Referrals are made by three or four of the programs for substance abuse treatment, financial services, physical health services, housing assistance, and legal services. Numerous other services are provided directly or by referral across the four programs.

Role of Off-Reservation Programs in Service Delivery to Indian Families Involved with Public or Child Welfare Tribal Agencies

While most child and family service programs of off-reservation centers do not operate under a traditional child welfare model, their functions include providing preventive and remedial services to families involved with public and tribal child welfare agencies. Program activities also may be directed toward conducting home studies, recruiting Indian foster family and adoptive homes, and acting as liaison between public and tribal child welfare programs. Two of the four programs are State-licensed or certified child-placing agencies. Informal contacts between off-reservation and public or tribal program staff most often occur in connection with specific cases.

Characteristics and "Caseloads" of Program Staff

The number of child and family service workers in the four programs ranges from two to eight. Of the total of 18 staff, 16 are Native American. Three of the four programs have at least one MSW on staff. The staff average at least 4 years of child welfare experience. Virtually all workers are full-time.

Of all families and children being served by the four programs, approximately 135 are known to be child welfare clients. The programs are providing them with pre-placement, placement, and post-placement services.

Recruitment of Indian Students for Social Work Training

Three of the four programs work with local universities to recruit Indian students for social work education or training, and the fourth program is setting up a recruitment effort. One program has staff who are field practicum instructors, and another accepts students for practicum experience.

Recruitment of Indian Foster Families

Three of the four programs are involved in Indian foster home recruitment. One program has not experienced much difficulty, reporting that the number of homes is growing as people hear about ICWA, and that 18 of 25 applicants have been approved in the past 2 years. Recruitment has posed difficulties for the other two programs; administrators indicated that Indian families are reluctant to become involved with a public system that asks many personal questions of applicants. Both State-licensed placement programs have written standards for foster families.

C. Program Needs

Needs of Off-Reservation Programs in the Next Two Years

Additional services needed by clients of off-reservation programs include day care, crisis child care, early warning and intervention programs, family therapy by Indian professionals, culturally relevant treatment programs, substance abuse counseling, and domestic violence counseling.

In addition to these specific services, off-reservation program respondents named several programmatic needs, including child advocates involved at each step of the judicial process for alleged abuse and juvenile offense cases; a legal component with an attorney to mediate in child welfare cases; and a visiting nurse for medical outreach in homes. Also needed are more attorneys who specialize in the ICWA and closer interaction with tribal and public agencies to increase opportunities for delivering pre-placement intervention services to at-risk families.

Modifications Suggested to Increase the Effectiveness of Title II Funding for Programs

Comments about Title II funding echo some of those cited by other respondents. Lack of stability as a result of the competitive award process and the varying dollar levels each year make planning and continuity difficult. Funding should be increased and be consistent. Payment procedures should be improved to assure prompt reimbursement after invoices are submitted.

Detailed Discussion of Findings

The preceding pages summarized findings of this study related to child and family service programs of off-reservation Indian centers. The remainder of the chapter presents a detailed report of these findings.

A. Organization of Off-Reservation Indian Center Child and Family Service Programs

Unlike public, tribal and BIA agencies, off-reservation Indian centers are voluntary organizations. Most are multipurpose, with relatively fluid programming that responds to identified needs and also--and perhaps especially--to available funding. This section describes the organizational context within which child and family programs of these centers operate. It also discusses funding for these programs and how the centers have been affected by the Indian Child Welfare Act.

1. What is the scope of services offered by off-reservation Indian centers? Where do child welfare-related activities fit within the broader scope?

The nation's off-reservation Indian centers are quite varied in their size, programming, staffing, and other key attributes. Many continue to operate on the model of mutual aid and social societies. They provide varying types of assistance--such as interpreters, information and referral services, housing and job lists, clothing banks, food pantries, and social activities--depending on local needs and resources. Other centers are more specialized in their offerings, perhaps focusing on health and mental health services, job training and employment, youth services, legal aid, or advocacy for Indian issues. Many specialized centers also make some types of general assistance available to their clients.

The exact configuration of services offered by an off-reservation center at one point in time depends in part on what special-purpose grant funds it has secured. Many of the special-purpose grant programs operated by the Bureau of Indian Affairs, the Indian Health Service, the Office of Human Development Services in DHHS, and other Federal agencies are open to applications from Indian-operated organizations. When a center receives such funds, it adds that program component to its other services for the duration of the grant and either hires new staff or shifts responsibilities among current personnel.

A few off-reservation centers have comprehensive child and family services as their core program, and number of centers include limited child and family services, such as health care referral and family-centered activities, among their core offerings. For the most part, however, a comprehensive child and family service component is added to a center's core program only when Title II or other funds are received.

2. **What are the sources and amounts of funding for off-reservation Indian child and family service programs? For what does each funding source pay?**

Title II of the Indian Child Welfare Act, which provides funds for tribal child welfare programs, is the most widely used funding source for off-reservation child welfare-related services. Tribes and off-reservation centers compete for available Title II funds, with no pre-set standard for the proportion of funds that is to be awarded to each type of program.

Since the first Title II awards were made in Fiscal Year 1980, approximately 67 off-reservation centers have won grants ranging from $15,000 to $200,000. The funds have supported a wide range of services, including those the ICWA gives as examples (i.e., foster and adoptive home support, adoption subsidies, counseling and treatment, family assistance, and legal representation in child custody proceedings). As was shown in Table 6-1, between 18 and 26 percent of the Title II grants awarded in each of the three most recent fiscal years have gone to off-reservation centers.

Funds other than Title II are identified and secured site by site. A small number of centers serve as State-licensed child-placing agencies, recruiting Indian foster and adoptive homes and monitoring substitute care placements of Indian children under State contract. Some centers use Indian Health Service funds for child welfare-related services such as abuse and neglect casefinding and treatment. Discretionary grants from the U.S. Department of Health and Human Services provide occasional funding for service demonstrations. Many centers depend on local government grants, donations from philanthropic organizations and individuals, and fund-raising events to support a substantial portion of their activities, including their child and family services.

All four off-reservation center child and family service programs visited for this study received Title II funds for their 1986-87 program year. It was the seventh year of Title II funding for the Tulsa center, the sixth year for the Sioux Falls and St. Paul programs, and the fourth year for the Phoenix center. All programs except St. Paul were funded again in Fiscal Year 1987.

Three of the four programs received funds for their 1986-87 program year from sources in addition to Title II. Both the Phoenix and St. Paul centers are certified or licensed by their respective States as child-placing agencies, and the St. Paul center receives State funds under this arrangement. The Tulsa center receives an Indian Health Service grant under the Urban Indian Health Act, a portion of which defrays some overhead expenses and pays part of the staff salary for the child and family program. Two of the four programs also received donations from local organizations (viz., the Lutheran Services Ministry, Sertoma, and United Way) during the program year. Funding amounts for the child and family programs at the four sites as reported by the program directors are shown in Table 8-1.

Table 8-1

1986-87 Funding for
Off-Reservation Indian Center
Child and Family Services Programs

Funding Source	Program A	Program B	Program C	Program D
Title II	$ 75,000	$ 199,764	$ 110,000	$ 89,101
State				$ 50,000
Indian Health Service		not specified		
Local donations		$ 2,000	$ 21,000	
Total	$ 75,000	$ 201,764+	$ 131,000	$ 139,101

3. What impact has implementation of the Indian Child Welfare Act had on off-reservation Indian centers? On Indian children and families?

For all four centers visited for this study, the most visible impact of the Act is that its Title II grant program enabled them to create their child and family services components. As a result, one respondent observed that meeting urban needs has improved. Efforts to implement the Act were cited by another as having created better relationships with the reservations. One center also reported an increase in phone calls from Indian people as word about the Act got out. Not only are there calls from families involved in child custody proceedings, but also there is "a lot of interest by Indian adoptees wanting to know about their Indian background. Many of them are having a lot of emotional problems."

Off-reservation respondents also noted outcomes of the Act beyond its direct impact on their programs. Among them, they noted that foster care placement of Indian children has been reduced, adoption of Indian children by non-Indian families has been curbed, and there are more direct services for case planning though public agencies. One program director observed that, "Without the Act, there would have been no changes in the system. Like federally mandated desegregation, it wouldn't have happened without a Federal law and consequences."

B. Services and Staffing of Off-Reservation Child and Family Programs

This section addresses several of the same questions asked in earlier chapters about public, tribal and BIA child welfare programs. The order of presentation is somewhat different, however, to help clarify fundamental differences between off-reservation programs and the other more formal agencies. Described first are services of off-reservation programs and their role in child welfare casework. Staff-related topics are addressed next, followed by issues concerning the recruitment of Indian foster families.

1. What services are provided by the child and family service programs of off-reservation Indian centers? For what services do the programs make referrals? What services do program clients use most often?

Off-reservation child and family service programs generally are not formal child welfare agencies in the traditional sense. They do not have the authority to remove children from their homes, nor do they supervise substitute care placements, and their clients are not limited to families who are involved with a child welfare system. Instead, these are multi-purpose family assistance programs whose services are expanded as client needs are identified.

Table 8-2 summarizes information about services available to clients of the four child and family service programs visited. The table shows that all four programs provide caseworker counseling and parenting classes. Family

Table 8-2

Services for Clients of Off-Reservation Indian Center Child and Family Programs

Service	Number of Programs that Provide Service Directly	Number of Programs that Provide Referral for Service	Number of Programs where Service is One Most Used by Clients
Therapy from a psychologist/ other mental health services		2	
Caseworker counseling	4	1	4
Family counseling	3		3
Drug or alcohol treatment		4	1
Physical health services	1	3	
Financial services	3	4	
Housing assistance	1	3	1
Employment services	2	2	
Educational or vocational training		2	
Legal services		3	1
Homemaker services	2		
Food bank	1	2	2
Parenting classes	4	1	3
Child care	1	2	
Early childhood programs	1	1	1
Parent, teen or adult support groups	2	1	1
Transportation	3		
Youth activities	2		

Others mentioned as provided:

- Protective services
- Outreach for handicapped & special needs children
- Early detection & prevention
- Family outings
- Community education
- Legal counseling for ICWA
- Household set-up (bedding, cooking supplies, etc.)
- Talking Circle group work
- Home visitation & outreach
- Enrolling children in school

Others mentioned as referred:

- Legal counseling for ICWA
- Early childhood development centers

counseling, financial services, and transportation are offered by three of the four. All four centers make referrals for substance abuse treatment and financial services; three refer for physical health services, housing assistance, and legal services. Caseworker counseling, family counseling, and parenting classes are the most frequently used services. Respondents named many services provided by their programs in addition to the ones about which they were queried specifically.

2. What role do off-reservation child and family service programs play in the delivery of services to Indian families involved with public or tribal child welfare agencies?

While most child and family service programs of off-reservation centers do not operate under a traditional child welfare model, their functions include providing preventive and remedial services to families involved with public and tribal child welfare agencies. Sometimes one of these agencies contacts the off-reservation program for assistance with a child welfare client. At other times the client takes the initiative, contacting an off-reservation child and family service worker for services or other aid. A few off-reservation programs are State-licensed child-placing agencies, locating and approving substitute care homes for children under the jurisdiction of the State court.

While two of the four programs we visited are State-licensed child-placing agencies, neither of these takes custody of children who are under State jurisdiction. Two programs occasionally have provided case management and supervision for cases under tribal jurisdiction when the child was to remain in the urban area rather than return to the reservation. None of the programs has a formal, written relationship or agreement with either local public or tribal child welfare programs. However, each provides services to clients of these programs and consults with their staff when requested.

Because none of these programs is a formal child welfare agency, none receives official reports of suspected child abuse or neglect. Those who receive informal reports refer them promptly to the appropriate authority. Two respondents reported having been involved by the public agency in a follow-up investigation to an abuse report.

Activities of these programs that are directly child welfare-related include:

- conducting home studies of client families and prospective foster and adoptive families;
- providing or referring for services that the family's child welfare case plan identifies as needed;
- recruiting Indian families to provide foster and adoptive homes;
- consulting with public agency staff on Indian cultural issues relevant to a case;

- counseling parents on their rights under the Indian Child Welfare Act and acting as a parent advocate when necessary;
- providing or referring for interpreters;
- acting as liaison between public and tribal child welfare programs; and
- providing transportation for a child or parent between the urban center and the reservation.

Respondents from the off-reservation child and family programs characterized their relationships with public child welfare programs as generally good, although variable. Whether or not the off-reservation program is used as a resource, and how early in a case this occurs, often seems to depend on which public agency caseworker is assigned to an Indian's family's case. One respondent reported that some public agency staff occasionally refer cases informally for early intervention by the off-reservation program.

3. What are the characteristics of off-reservation Indian center child and family service workers? How large are their caseloads?

Table 8-3 presents a summary of the race/ethnicity, education, full-time/part-time status and child welfare experience of the child and family service workers at the four centers visited for this study. As the table shows, the Phoenix and St. Paul centers each have four people on their child and family services staff, the Sioux Falls staff has two members, and the Tulsa program has eight. Three of the four programs have at least one MSW (that is, someone who has earned a Master's degree in Social Work) on the staff. All staffs have an average of at least four years of child welfare experience. With one exception, all the child and family workers are full-time.

None of the programs had lost any full-time child and family service workers in the year preceding our visit. A part-time worker in one program had resigned to return to school.

Because most off-reservation programs do not operate on a traditional child welfare model, they generally do not refer to a "caseload" in the same way as child welfare programs. Many individuals and families receive services such as referrals and explanations of procedures on a one-time or intermittent basis. Others are involved with the program over a longer period--perhaps in family counseling or parenting classes. As explained above, clients may or may not also be clients of a public or tribal child welfare agency. Further, unless a family has been referred to the off-reservation program by a child welfare agency or has mentioned its involvement with child welfare to the off-reservation worker, the off-reservation program may not know that a client is in the child welfare system.

Of the sites we visited, American Indian Sevices was working with families of 21 children it knew were child welfare clients: 1 in protective services,

Table 8-3

Child Welfare Staff Characteristics of Off-Reservation Indian Center Child and Family Programs

	Program A (N=2)	Program B (N=8)	Program C (N=4)	Program D (N=4)
Race/Ethnicity	%	%	%	%
Native American	100.0	100.0	50.0	100.0
White	0	0	50.0	0
Education	%	%	%	%
Master's, social work	0	12.5	75.0	25.0
Master's, non-social work	0	12.5	0	0
Bachelor's, non-social work	50.0	37.5	0	50.0
Some college, non-social work	50.0	25.0	0	0
High school	0	12.5	25.0	25.0
Child Welfare Experience	years	years	years	years
Mean*	4.3	7.4	8.5	8.2
Median*	4.3	6.0	9.5	7.8
Employment Status	%	%	%	%
Full-time	100.0	88.9	100.0	100.0
Part-time	0	11.1	0	0

*Means and medians are based on workers for whom data were reported and are approximations. They probably underestimate the true numbers somewhat because years of experience usually are rounded down in reporting. Persons with between 5 and 6 years of experience, for example, probably were reported as having 5 years of experience.

16 in substitute care, and 4 in after-care. Approximately 36 percent of the Indian Health Care Resource Center's 250 client families were involved in child welfare: 25 percent in protective services, 10 percent in substitute care and 1 percent in pre-adoptive placements. Among the clients of the Phoenix Indian Center were two children in State substitute care for whom the center was providing formally-arranged support services. Similarly, the St. Paul American Indian Center's "caseload" included 22 children in State foster care.

4. **Where do staff of off-reservation programs turn for training and technical assistance on the Indian Child Welfare Act and the delivery of child and family services? What efforts do these programs make to recruit Indian students for social work training?**

The following were named as resources for training on the Act.

- o Northern Plains Indian Tribal Conference--two 2-day workshops in past year.
- o Bureau of Indian Affairs.
- o Inter-Tribal Council of Arizona.
- o Three Feathers Associates.
- o Oklahoma Indian Child Welfare Association.
- o Tribal court judges.

Training and assistance on service delivery issues had been received from the following.

- o Good tribal social service workers. (The Rosebud and Sisseton-Wahpeton Sioux tribal programs were given as examples.)
- o Center for Indian Education, Arizona State University.
- o Three Feathers Associates.
- o State (Minnesota) training workshops.
- o 2-week seminar on alcohol and other drug abuse at the University of Minnesota by the Minnesota Indian Institute on Alcohol and Drug Abuse.

Three of the four programs work with local universities to recruit Indian students. Two staff members of one program are field practicum instructors. Staff of another program make presentations at area universities and the program accepts local students for practicum experience. A third program had worked with a local professor who applied unsuccessfully for a grant to fund social welfare students that would have focused on Indian students. The fourth program is in the process of setting up a recruitment effort.

5. **Do off-reservation programs have written standards for foster families? What is the experience of the programs with regard to recruiting and approving Indian foster families?**

The two State-licensed or certified placement programs both have written standards for foster families. Both used State standards as a model; one of the two also incorporated standards from local tribal programs.

One of the four programs we visited is not involved in foster home recruitment. Two others reported that recruiting Indian foster homes has been quite difficult. One of these had had six applicants in the previous two years. Only one of the six actually had been accepted, while the others had either moved away or lost interest. The second program reported that, "We did a public service announcement on a local TV station, but the result was white families willing to take Indian children."

When asked why it is so difficult to recruit Indian families, the two respondents indicated that families are reluctant to become involved with a public system. As one said, "The forms they have to fill out are quite extensive and ask questions about things a lot of people consider to be personal business. Many of these families have been involved with the State at some point and they want to leave that behind them. When they find out what they will have to go through to be approved, they just don't follow through."

For the fourth program, recruitment has not been so difficult. It reported 25 applicants in the preceding two years. Fourteen of these had been approved and four more were in the process of being approved. For this program, "The number of homes is growing steadily as more people hear about the [Indian Child Welfare] Act."

C. Program Needs

The final two questions addressed in this chapter relate to ways that the role of off-reservation programs in the delivery of child welfare-related services can be strengthened.

1. **In addition to those services already being provided or referred, what other child welfare-related services do clients of off-reservation programs need? What needs do off-reservation Indian center child and family service officials project for their programs over the next two years?**

One or more respondents named each of the following as a service needed by clients but not currently available.

- Day care for small children that provides preparation for kindergarten, socialization, and respite for parents.

- Crisis child care, including emergency homes.
- Early warning and intervention programs.
- Family therapy by Indian professionals.
- Culturally relevant treatment programs.
- Housing assistance.
- Transportation.
- Alcohol and drug counseling.
- Domestic violence counseling.
- A comprehensive network of service providers.

Respondents also identified the following new programmatic areas into which their programs should expand.

- Child advocacy in judicial proceedings, including attention to children's rights in court and children as witnesses. Would like to have an advocate present at every step of the judicial process in cases of alleged abuse and in juvenile offense cases.
- Legal component with an attorney to mediate in child welfare cases. Clients currently must rely on Legal Aid.
- Visiting nurse to accompany social workers to homes and perform medical outreach. Much of the work in basic home cases involves limited (i.e., mentally handicapped) parents.
- Emphasis on family preservation. The situation is very different for an urban family than for one on the reservation. Extended family is lacking and there is much red tape to obtain services.
- Outreach program with workers stationed outside of the urban area.
- Group home for Indian children.

In addition to these programmatic expansions, one respondent expressed a need for more attorneys who specialize in Indian child welfare cases. Another identified the need to "bring tribal and public agencies together to recognize our potential role here. [If given the opportunity] we could be much more helpful in intervening before the child is removed from the home." A St. Paul respondent noted that, "Some 300 Canadian Indians are migrating into Minnesota from the north, and it seems likely that they will have some future impact on foster care services."

2. What modifications do child and family services staff suggest in the Title II funding program as it affects off-reservation programs?

As explained earlier, both tribes and off-reservation centers are eligible to compete for Title II funds. There is no formula to guide the division of funds between the two types of programs. In the three most recent fiscal years, off-reservation programs have received 23 percent of the Title II funds awarded; the balance has gone to tribal programs. One or more off-reservation center respondents made each of the following comments about Title II.

- I would like to see money go for direct services for children and families--no foster care recruitment, no group home funding. (Note that this comment was made by one of the respondents who identified an Indian group home as a need.)
- The competitive aspect causes a lot of dissension among programs. (One respondent who made this comment also said that there are pros as well as cons to having to compete for the money, but dissension definitely is one result.)
- The emphasis on funding tribal programs results in a lack of programs in urban areas with large numbers of Indians.
- Delays in getting funds after invoices are submitted have caused cash flow problems, resulting in slowed operations and lowered morale.
- A study should be done of child welfare issues among urban Indians--their needs and the effects of the Indian Child Welfare Act.
- Funding under Title II is neither stable nor predictable. The amount of the grant is never what was requested. Funding needs to be consistent--and to be increased. (As is true for tribal child welfare programs, off-reservation programs have experienced considerable discontinuity in Title II funding. Of 67 Title II recipients since FY 80 identified as off-reservation centers, three have received funds in all eight years. Thirteen centers received three consecutive grants from FY 84 through FY 86; ten of these were funded again for Fiscal Year 1987.)

PART III

SUMMARY AND RECOMMENDATIONS

Chapter 9

Summary and Discussion

The Indian Child Welfare Act was enacted 10 years ago. The current study was undertaken to identify the extent to which the goals for Indian child welfare are being met and what problems remain. Chapter 9 summarizes and discusses the implications of key findings from the nationwide mail survey and field study of public, tribal, BIA, and off-reservation child welfare programs presented in Chapters 3 and 5 through 8. The chapter is organized around the five sets of policy questions identified in Chapter 1.

Prevalence and Characteristics of Indian Children in Substitute Care

1. **What is the prevalence and flow of Indian children in substitute care? What are the characteristics of these children and their placements? How does the current situation compare to previous points in time? To the general substitute care population?**

The nationwide mail survey revealed that 9,005 Native American children were in substitute care on June 30, 1986 under the supervision of public agencies, tribes, the BIA, and off-reservation Indian programs (52, 35, 9, and 5 percent of the children, respectively). This is nearly double the 4,849 children in public care in 1984 reported through the Voluntary Cooperative Information System (VCIS). Although lack of comparable earlier data makes estimates tentative, it appears that the number of children in tribal and off-reservation care has increased dramatically since the early 1980s, while the number served by BIA agencies has dropped by more than half during that time and the number in public care has declined by about 15 percent.

Prevalence of Children in Substitute Care

Indian children are greatly overrepresented in substitute care (3.1 percent of the total substitute care population) in relation to their proportion in the child population age 0-17 nationally (0.9 percent). They are placed in substitute care at a rate 3.6 times greater than the rate for non-Indian children.

Flow of Children Through Substitute Care

Over 9,300 Indian children entered care during 1986, and 6,258 left care. At this rate, the number of Indian foster children will increase dramatically in the future. This finding takes on more force when viewed in conjunction with the rise in the number of Indian children in care--from about 7,200 in the early 1980s to 9,005 in 1986.

Age of Children

Native American children in care are younger than foster children of all ethnic groups, averaging 7 to 9 years compared to 12.6 years. This finding is consistent with the fact that the overall Indian population is younger than the general U.S. population. Tribal programs have more younger children than other programs.

Reasons for Placement

Protective service reasons (neglect, abuse) account for 50 percent of the Indian children removed from their homes, and parental problems (abandonment, hardship, substance abuse, other) for 28 percent. Comparable data for children of all ethnic groups are 56 and 18 percent, respectively. Indians appear somewhat less likely to abuse or neglect their children but more likely to have personal problems that cause placement. The proportions of children in each reason-for-placement category vary widely from state to state, reflecting differences in State law and caseworker practices.

Living Arrangements

Seventy-seven percent of Indian foster children reported in the mail survey live in family settings (related or unrelated foster homes and unfinalized adoptive homes), while ten percent reside in institutions. These percentages are similar to those for all foster children, as well as to those for all children in the care of three types of programs examined for the field study. Unlike the mail survey that showed children in BIA care are least likely to live with foster families (58 percent), the children in BIA care at our study sites were just as likely to be in family settings (82 percent) as children in public or tribal programs (86 and 83 percent, respectively). This suggests that the BIA programs visited do not represent the national BIA norm.

Ethnicity of Foster Parents

Only 63 percent of Indian children reported by all programs in the mail survey are in foster homes in which at least one parent is Indian. For public programs, this proportion is only 35 percent, which is lower than that found for children in public care in our study sites (47 percent). However, in the mail and field study surveys, not even the tribes, BIA, and off-reservation programs could place all their children with Indian families, which illustrates the shortage of Indian foster homes.

Case Goal

Only 65 percent of the Indian children reported in the mail survey had a case goal that would place them in a family setting (return home, guardianship, relative placement, or adoption). This figure is somewhat lower than the proportion of children in the field study public and tribal programs with family-oriented case goals (75 and 70 percent, respectively). Indian children nationally were slightly more likely than all foster children to have a goal of return home/relative placement (56 vs. 51 percent) and less likely to have a goal of adoption (9 vs. 14 percent).

Discussion

The disproportionately high placement rate of Indian children compared to non-Indian children indicates that the goal of preventing the separation of Indian children from their families continues to be very difficult to achieve. The ICWA was passed in part to provide protections against the "often unwarranted" removal of Indian children from their homes. Our data show that abuse/neglect and parental problems account for similar percentages of children entering care among Native American children and the overall substitute care population (73 and 78 percent, respectively). The documented reasons for placement do not reveal great differences between the Indian and overall substitute care population; obviously, there are other factors operating to cause such high placement rates for the Indian population.

The increase in the number of Indian children in care over the past 5 to 6 years (in contrast to the decrease in the foster care population overall) and the large proportion who are not discharged within the year that they enter care (about one-third of the children) speak to a continued growth of this population. The fact that these children are younger than foster children nationwide and that tribal programs have more younger children than other programs has serious implications related to the placement choices available to each type of program, as well as to the abilities of tribal programs to deliver services needed by this younger population. Shortages of relative and non-relative Indian foster homes are evident across all program types and will continue to affect observance of the order of placement preference.

Implementation of the Federal Standards for Removal and Placement of Indian Children

2. **To what extent are the minimum Federal standards for removal and placement of Indian children, as specified in the Indian Child Welfare Act, being followed? What factors are promoting or undermining full implementation of these standards?**

The Indian Child Welfare Act establishes requirements for State courts and State and local child welfare agencies that are considering placing an Indian child in substitute care or terminating parental rights to an Indian child. Adherence to many of those provisions was examined during this study.

Notification of the Parent and the Tribe

In every involuntary placement or termination of parental rights proceeding in a State court, the ICWA requires that the child's parent or custodian and the child's tribe be notified of pending custody proceedings and of their right to intervene. In the 126 public program case records under the jurisdiction of the State, we found that between 65 and 70 percent had copies of notices, notations that a copy was sent, or other indications that the parents had been notified of the proceedings, and that about 80 percent of these records also contained evidence of the tribe's notification. While incomplete documentation practices may be affecting these figures, it seems apparent that notification is not always observed. This is corroborated by three of the eight tribal child welfare program administrators who knew of one, two, and five cases, respectively, in the past 2 years where their tribe should have been notified and was not.

Factors affecting the implementation of this notification provision are varied and include:

- Procedures for identifying that a child is Indian and therefore subject to the Act, which tend to be the responsibility of a caseworker who may not raise the issue with the parent or may find that the parent does not acknowledge Indian heritage.
- Unfamiliarity with tribal names and tribes, especially those located outside the state, hampering efforts to identify the specific tribe with which the child is or may be affiliated.
- Currency and accuracy of information concerning where to send the tribal notification, especially for out-of-state tribes.
- Parental request to withhold notification of the tribe.
- Use of informal rather than formal written notification procedures.
- Delays in issuing notices after the information has been collected.
- Ignorance of the requirement.
- Differing interpretations of notification requirements in cases involving voluntary placements and termination of parental rights.

Transfer of Custody Proceedings to Tribal Jurisdiction

Upon petition by the child's parent or tribe, the State court must transfer custody proceedings to the jurisdiction of the tribal court unless the tribe declines the transfer, the parent objects, or there is "good cause to the contrary." Data from case records reviewed in the study sites suggest that requests for transfer of cases from State to tribal jurisdiction usually are honored. In the 23 public program cases in which a tribe had requested that jurisdiction be transferred, the request had been honored in 13 cases and denied in 10 cases, often because of objections by the parent. Forty-six of one hundred tribal program cases under tribal jurisdiction had begun substitute care under State jurisdiction and had been transferred upon request of the tribe.

Among the 16 State and local program administrators, 4 were aware of a total of 9 to 11 cases wherein the courts had found "good cause" not to transfer jurisdiction. Of the 11 tribal judges, 4 identified 9 cases for which requests of their tribes to assume jurisdiction had been denied. All cases were in the courts of other States. Three of the 11 State court judges had themselves denied transfer in one case each. In examining the reasons given by respondents for the courts' denials of transfer (admittedly risky because some information is secondhand and all of it is based on memory), it appears that some of the denials fit the "good cause" circumstances described in BIA Guidelines for States Courts (e.g., no tribal court; advanced stage of proceeding when petition filed), while some denials appear to be based on "socio-economic conditions and perceived adequacy of tribal ... social services or judicial systems ...," which is contrary to the Guidelines.

Factors that impede implementation of the provision to transfer proceedings include:

- Lack of tribal response to notification, which many courts appear to interpret as disinterest on the part of the tribe, or delays in the receipt of tribal requests, which mean that the State has been working on the case for a prolonged period of time.
- Belief of public program staff or State judges that the tribal program does not have the services or resources to meet the needs of the child and/or family.
- Concerns of public staff or judges about the quality of substitute care or living conditions on the reservation.
- Prejudice against Indians.
- Ignorance of the requirements of the Act.
- Lack of tribal funds to transport the child or to provide legal services or representation for the transfer process.

In contrast to problems associated with denials of transfer requests, several tribal and BIA respondents and one State judge cited the practices of some counties and States that transfer cases to the tribe automatically. This occurs whether or not the tribe has requested transfer or can provide needed services and is seen as a way to shift financial and casework responsibilities for all Indian children to the tribes.

Tribes may decline jurisdiction over child welfare cases and often do. In six of the eight tribal programs that provided information, over the past 2 years, five tribes declined jurisdiction in from 72 to 90 percent of the cases (based on N's ranging from 40 to 300 notifications), while one tribe declined in only 20 percent of the cases (N = 10 notifications).

In the case records of 18 of the 22 Indian children in public care who were members of 7 of the tribes visited, there was evidence that the tribes knew of the custody proceedings. Jurisdiction was requested in four cases and declined in nine, while five case records gave no information on the topic.

Reasons for declining jurisdiction given by respondents and in the case records include: another tribe's being the more appropriate custodian; child's lack of ties to the tribe or Indian culture; child's ineligibility for tribal enrollment; parental objection; satisfaction with the public agency's case goals and plans for the child; and lack of tribal resources to meet the child's needs.

Preventive Efforts to Avoid Removal of the Child

Before a State court can order that an Indian child be removed from the home, the court must be satisfied that active efforts to provide services designed to prevent the family's breakup have proved unsuccessful. Documentation in 173 case records of Indian children in public care showed that preventive efforts to avoid the removal of the child had occurred in 41 percent of the cases. Such efforts usually involved counseling by the caseworker. This figure may be underreported as a consequence of caseworkers' recordkeeping practices; preventive efforts may not be possible in cases in which emergency removal of the child is necessary; and prior episodes of care with provision of intervention services may have been unsuccessful in changing parent behaviors. Nevertheless, the data suggest that a majority of families were not engaged in the required preventive efforts.

Evidentiary Requirements

Before ordering removal, a State court also must hear "clear and convincing evidence" (in placement decisions) or "evidence beyond a reasonable doubt" (in termination of parental rights cases) that the child otherwise would experience "serious emotional or physical damage." Testimony from expert witnesses must be included as part of the evidence.

Use of expert witnesses was examined in interviews with State and tribal court judges. During the past year, three of the State judges had ruled for termination of parental rights (TPR) in a total of six cases, all of which involved the use of expert witnesses. However, 3 of the 10 judges who had ordered substitute care placements during the past year did not use expert witnesses in any of the proceedings. No testimony was called for in 2 cases heard by one judge because the mothers admitted the offense, or in the 10 to 15 cases heard by another judge because he mistakenly believes that expert witness testimony is required only for TPR, not placement, cases.

Following the Order of Placement Preference

One of the greatest concerns leading to the passage of the ICWA was the placement of Indian children in non-Indian foster and adoptive homes. Data from the mail survey of public programs show that only 35 percent of the Indian children were placed in homes where at least one parent was Indian; for the public programs in the field study, the figure is 47 percent. There obviously still exists a large gap in placing Indian children in homes reflective of their own culture.

Adherences to the order of adoption placement preferences cannot be addressed by mail survey data because race/ethnicity of adopting parents is not maintained by most State agencies. Among the 173 public program case records reviewed, 9 were closed cases in which the child had been adopted. Two of the nine were adopted by a relative or member of their tribe, four were adopted by members of other tribes, two were adopted by non-Indians, and the race of the ninth family was not identified. For seven open cases in which the case goal was adoption and intended adoptive parents had been identified, the distribution across these categories was somewhat similar. Adherence to the adoption placement standards appears to be fairly high, although the number of cases is very small. As seen earlier, Indian children are less likely to have adoption as a case goal.

Factors that prevent full implementation of the standards related to following the order of placement preferences include:

- Lack of available Indian homes and extended family members.
- Unwillingness of Indian families to undergo the State licensing and training process.
- Concern that extended family placements may expose the child to the problems that initially caused removal from home.
- Failure to recruit Indian families.

One respondent thought that public programs are not pushing placement preference for Indian children because tribes are not assuming jurisdiction.

Factors that promote implementation of the placement preference are:

- Having a State-administered system that gives control and responsibility to the staff to direct placement choices.
- Dedicated staff who pursue the appropriate placements on a case-by-case basis.
- Availability of Indian homes.
- Recruitment efforts made by the local agencies.
- Having Indian workers in the child welfare system making recommendations about placement.

"Full Faith and Credit" to Tribal Records and Court Rulings

All State-level public program respondents, half of the local program administrators, and 9 of the 11 State court judges gave interpretations appropriate to the intent of the Act that tribal acts and decisions have the same force as those of State courts and "any other entity." All of the judges said that there had never been an occasion when they had not honored a tribal court's ruling. Five of the 11 tribal court judges cited a total of 10 cases (only one involving a State court in the field study states) in which their tribe's proceedings were not given full faith and credit.

This provision of the ICWA appears to have fairly high acceptability in the study sites. That some local administrators did not know about the provision and other, including judges, confused it with jurisdictional matters, suggests a need for training. Lack of understanding or ignorance of the requirement may influence adherence in other jurisdictions.

Right to Court-Appointed Counsel for Indigent Parents

When appearing in State courts, Indian parents who are indigent have the right to court-appointed counsel. In most of the study sites, standardized procedures to determine indigency appears to be in place for Indian (as well as non-Indian) parents. Use of court-appointed counsel for Indian parents has been almost universal in all cases heart in the past year by 5 of the 11 State court judges. Some tribal offices felt that State-appointed legal representation is not provided when it should be and that this important safeguard must be maintained because tribes often are not able to hire attorneys to appear in families' behalf.

Voluntary Proceedings

Protection of Indian parental rights in cases involving voluntary substitute care placements and voluntary terminations of parental rights appears to be widespread. Most State court judges reported that they fully explain to the parents their rights and the consequences of their actions and question the parents to ascertain that they understand what they are doing. Interpreters have been used in only 2 of the 11 courts during the past year and then in only 3 cases. Of all the voluntary proceedings (at least 60-65) handled by 9 judges, consent was withdrawn in only 1 case that was later found not to be subject to the ICWA.

Discussion

Adherence to the minimum Federal standards for removal and placement of Indian children appears to be fairly consistent in the four study states with respect to these provisions: notification; transfer of custody proceedings to tribal jurisdiction; use of expert witnesses in termination of parental rights cases; following the order of placement preference in adoption cases; giving "full faith and credit" to tribal rulings; right to court-appointed counsel for indigent parents; and assuring informed consent in voluntary proceedings. Less favorable findings emerge in the four study states with respect to other provisions: preventive efforts to avoid removal of the child; use of expert witnesses in involuntary substitute care placements; and following the order of placement preferences for substitute care placements.

It is important to remember that these four study states account for 33 percent of all Indian children in substitute care and 25 percent of all Indian children in public program care. As a consequence, public officials and State court judges can be presumed to be among the most knowledgeable about and experienced in implementing the provisions of the Indian Child Welfare Act.

The relative success of these states is tempered by evidence that some State court judges, for example, are ignorant of or are ignoring requirements for notification and transfer of jurisdiction upon request. One respondent characterized State courts as "fiefdoms" whose activities related to implementing the Act are not subject to monitoring. Information provided by tribal and BIA respondents points to problems with other states that do not notify the tribes of custody proceedings, do not give tribal courts "full faith and credit," and/or transfer children automatically to escape financial responsibility. Thus, continued efforts are necessary to ensure more widespread adherence to the Act.

Previous sections have presented factors that influence implementation of specific provisions of the ICWA. Factors that promote carrying out the intent of the Act, in the opinion of public and tribal officials, are enumerated below. They provide some insights as to the direction future efforts to improve adherence to the Act might take.

- Passage of a State Indian child welfare law that makes certain provisions of the Federal law more explicit.
- Hiring of Indian staff members in State and local public agencies to help inform policy decisions and strengthen casework practices related to Indian families.
- State-tribal agreements that provide support for foster care placements and for child welfare services.
- Training and technical assistance to help develop tribal child welfare services.
- Commitment of public agency staff to implement the Act.
- Judges' education on and awareness of the Act.
- Cooperative relationships between public agencies and Indian tribes and organizations.
- Recognition of the importance of tribal self-determination, self-sufficiency, and preservation of its members.

Factors that respondents believe deter or undermine implementation of the Act may be summarized as follows.

- Unfamiliarity with or antipathy toward the Act.
- Lack of experience in working with tribes.
- Turnover of public agency staff.
- Prejudice against Indians.
- Concern over tribal accountability for providing services and caring for children.

- Lack of sufficient funding for tribal child welfare services and proceedings.
- Absence of tribal courts with the authority to assume jurisdiction over proceedings involving tribe members.

Services and Casework Practices for Indian Children

3. What services are provided to Indian families whose children are in substitute care? How uniformly are the casework protections and practices prescribed in the Adoption Assistance and Child Welfare Act applied to Indian cases?

Caseworkers who have direct supervision over the cases of children and families assigned to them make important decisions related to case planning and what services are needed. It is of interest to note that the proportion of child welfare workers with at least a Bachelor's or Master's degree in social work is higher in tribal programs than in public programs visited during our study. Even though many fewer staff are involved, this is impressive testimony to the importance given professional credentials by tribal program administrators. Tribal staff evidence fewer average years of experience in child welfare compared to staff in the other types of programs. Eight of the twelve public programs have at least one Native American staff member.

Services Provided to Indian Families

Children and families in all of the child welfare programs receive services either directly from the agency or through referrals to other resources in the community or State. Caseworker counseling and transportation services are offered by all programs. In addition, services available at all public programs are family counseling and child care; and at all tribal and off-reservation programs, parenting clases; at all BIA programs, financial services. While other services may be offered at some or a few of the individual programs within each program type, referrals to other social services (for example, housing, medical, mental health, substance abuse, employment, legal and educational services) are the norm.

Recruitment of Indian Homes

Recruitment of Indian homes has posed difficulties for a number of the agencies across all types of programs. Three of four BIA respondents and half or more of the tribal and off-reservation programs reported difficulties. Reasons for the problem cited by various respondents include failure of families to follow through with the application process, sometimes because of the intrusive nature of the questions asked; failure to meet the standards for approval; resistance to taking on another child; and insufficient staff time to recruit families, complete the home studies and paperwork, and train foster families.

Except for those located on reservations, public programs have very few Indian foster families. State and local agency recruitment efforts range from nothing to multi-strategy campaigns. It appears that licensing requirements and a distrust of becoming involved in the public system account for some of the difficulties encountered in enlisting Indian families' participation as foster parents. In addition, most recruitment efforts involve standard public relations techniques. There has been little exploration of outreach methods that build on Indian norms and traditions.

Substitute Care Casework Practices

Case planning and management practices required in the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) apply only to public programs. However, because they represent standards of good practice, data on certain key provisions of the law were collected from case records reviewed in the tribal and BIA programs, as well as the public programs. Where appropriate, data from the mail survey are used for comparison. Pre-placement prevention efforts, substitute care placements, and case goals have been presented in earlier discussions, but they are summarized here.

- Efforts to prevent the child's removal from the home--usually involving counseling by the caseworker--occurred in 41 percent of the public cases, 37 percent of the tribal cases, and 33 percent of the BIA cases.

- Over 80 percent of the children placed by each of the programs went into foster homes; of these, 47 percent were relative and Indian non-relative placements in public programs, compared to 71 percent in tribal programs and 85 percent in BIA programs. The mail survey shows lower proportions of children in foster homes for each type of program (77, 69, and 58 percent, respectively).

- Seventy-five percent of the children in public programs have a case goal that will place them in a permanent family setting (return home, relative placement, or adoption) compared to 70 percent and 31 percent of the children in tribal and BIA programs. For nearly half of the BIA cases reviewed, however, the case goal could not be determined. Mail survey figures for the three types of programs are 64, 70, and 45 percent, respectively.

- Written case plans appeared in the majority of public and tribal case records (74 and 65 percent, respectively) but less than one-quarter (23 percent) of the BIA case records. Few case records contained plans that had been signed by the parent (21, 12, and 0 percent, respectively).

- Voluntary placements represented fairly low proportions of the cases reviewed in each type of program (16 percent of public cases, 25 percent of tribal, and 6 percent of BIA cases). Equal proportions of the public and tribal case records contained written agreements with the parents (64 and 65 percent), while neither of the two BIA case records contained an agreement.

- Among those case records with information on the last administative or judicial review, 80 percent of the public and tribal cases and 55 percent of the BIA cases had been reviewed in the last six months, usually by the court.

Discussion

The caliber of child welfare staff in the tribal and off-reservation programs is a powerful asset in the development and delivery of services to Indian families. However, caseloads as high as 42 children, with an 8-program average of 27, limit staff effectiveness to perform their work. The presence of Native American staff in two-thirds of the public programs enhances program capabilities to implement the ICWA, especially as regards placement decisions and case planning.

Substitute care case practices as evidenced in the review of Public Law 96-272 requirements are followed almost as well by tribal programs as by public programs. The BIA's record is less favorable. Staff across all program types need to strengthen their application of these standards in working with Indian children. A major area for improvement, especially for public programs that are required to apply the standards, is the development of written case plans to improve case management for children in care.

A summary of types of services delivered to Indian families whose children are in substitute care does not reflect the issues related to service availability in the community, capacity to serve the volume of clients, and eligibility to be served. Some of these issues are addressed in the last set of study questions.

Outcomes for Indian Children in Substitute Care

4. How long do Indian children stay in substitute care? What are the outcomes of their cases?

The mail survey data show that average length of time in care for Indian children is 12 to 23 months, the same as for children of all ethnic groups. Nearly 40 percent have been in care for more than 2 years, while 56 percent have been in care for less than 2 years. Tribes have larger proportions of children in care for the shortest periods of time, while BIA agencies have the largest percentage of children in care over 5 years.

The field study data enable us to make some comparisons of time in care for children whose cases were open and closed at the time of on-site review. Average number of months in public care for children still in care is 38 months; in tribal care, 29 months; and in BIA care, 57 months. For children whose cases were closed at the time of review, average length of time in public care was 26 months; in tribal care, 18 months; and in BIA care, 47 months. By program type, these patterns correspond to those found in the mail survey.

Outcomes for children discharged from care in the mail survey show family-based permanency (return home, relative placement, adoption, or guardianship) for 79 percent of the children. Children were more likely to be discharged to families if they were in off-reservation care (86 percent) or tribal care (83 percent) than in public (78 percent) or BIA care (72 percent). Based on field study data, the proportion of children discharged to family settings by public programs was 64 percent, while for tribal and BIA programs the proportions were 88 and 42 percent, respectively.

Only one percent of the children in public care were discharged because of transfer to tribal jurisdiction. This is a very low percentage considering ICWA mandates regarding transfer to the tribes if requested.

Discussion

The BIA has children in care for the longest period and has the smallest percentage of children discharged to family settings. These findings raise questions about the agencies' substitute care practices. Tribes keep children in care for shorter periods of time and discharge children to their Indian families or to adoptive parents more frequently than other programs.

With more and younger Indian children entering substitute care, programs can expect mounting pressure to find not only more foster homes but ones that can maintain the children for longer periods of time. This will impose an increased burden especially on the tribal and off-reservation programs, which are experiencing a large net gain of children in care. An onerous aspect of the findings regarding length of time in care is that more children are likely to live in several different foster homes, producing greater instability in their young lives.

Resources and Needs of Tribal and Off-Reservation Child Welfare Programs

5. **What resources, including funds, training, and technical assistance, are available to tribes to operate child welfare programs? What types of programs are operated by tribes and Indian-run organizations that receive Federal and other assistance? What factors are supporting and inhibiting the delivery of services by these programs? What are the programs' current and projected needs?**

The operations of tribal child welfare programs rely most heavily on Federal monies transferred directly to the tribes through "638" contracts and ICWA Title II grants. Title IV-E funds help to support foster care payments for some tribes through agreements forged with the States. In the field study sites, State funds or indirect support in the form of access to certain services and provision of training and technical assistance have been made available on a limited basis to several of the tribes.

Training and technical assistance resources include other Indian professionals in the community and in private organizations that specialize in child welfare matters (e.g., American Indian Law Center, Three Feathers Associates), State child welfare agencies, the BIA, and local university staff.

Child protection, substitute care, pre-adoption and aftercare services are offered by all tribal programs, but the range of services is fairly limited. Referrals to other social service providers are the norm, but availability of these services within the tribal structure depends upon other resources the tribe has been able to marshall (e.g., grants for substance abuse treatment, physical health facilities, support services). The high caseloads carried by many of the child welfare workers hamper efforts to deliver needed services to clients.

Off-reservation child welfare programs in the field study sites have been developed through the support of Title II grants over a several-year period. They are multi-purpose assistance programs that provide a range of preventive, remedial, and advocacy services to Indian families, including families involved in public and tribal child welfare programs. Two of the four are State-certified, child-placing agencies. As a function of their location in urban areas, they tend to have access to an established social services network in the community for referrals.

Inadequate and uncertain year-to-year funding for child welfare services is the foremost barrier in building tribal capacities. This problem limits the type and continuity of services that can be delivered and causes fluctuations in the number and expertise of staff available to plan and deliver casework services.

Among the current and projected needs of tribal programs are family-based services, mental health and substance abuse counseling and treatment services, day care and youth/adolescent homes and services, and emergency shelters. More staff, training and technical assistance in preventive and protective services, and development of procedural manuals would be beneficial. Off-reservation program respondents, besides naming services such as day care, early warning and crisis intervention programs, and family therapy by Indian professionals, also spoke of legal services and child advocacy needs in child welfare matters.

Discussion

Tribes need two types of basic resources to develop and improve the operation of their child welfare programs: increased, stable levels of funding, and training and technical assistance (T/TA). Respondents identified specific types of services and T/TA to assist their efforts to implement the ICWA. The generic categories of need commonly are identified by other social service providers about their own programs. But public social services, and specifically public child welfare programs, have enjoyed a long-standing commitment of public monies and governmental support to develop and sustain their activities.

The Federal ICWA mandates certain protections for Indian children and families. Given the relatively low funding levels for child welfare services and the net gains shown in the substitute care populations of the tribal and off-reservation programs, it is not suprising that officials at these programs see large gaps between their service capabilities and the magnitude of need. As public programs are successful in discharging more Indian children than enter their care, and thereby experience net losses of children in care, it is appropriate that a serious examination of allocation of resources to tribal and off-reservation programs be made.

Chapter 10

Recommendations

In the Indian Child Welfare Act, Congress declares that:

> [I]t is the policy of this Nation to protect the best interests of Indian children and to promote the stability and security of Indian tribes and families by the establishment of minimum Federal standards for the removal of Indian children from their families and the placement of such children in foster or adoptive settings which will reflect the unique values of Indian culture, and by providing for assistance to Indian tribes in the operation of child and family service programs.

As demonstrated by the findings presented in Parts I and II of this report and discussed in Chapter 9, there has been improvement in carrying out that national policy since enactment of the Indian Child Welfare Act (ICWA) in November 1978. Implementation of the ICWA has been uneven, however, across geographic areas and governmental levels, and with regard to specific provisions. Further, the protections extended to children and families by the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) are not being applied consistently to the Indian population.

The fact that, nine years after the Indian Child Welfare Act was passed, at least one State believed that it did not need to take steps to implement the Act because there are no Federally recognized Indian tribes within its borders suggests that Federal-level efforts to inform States about the law and enforce its most basic provisions have been uneven at best. That Indian tribes are expected to operate services for their people--and thereby assist States in the exercise of their child welfare responsibilities--with unpredictable and inadequate funding suggests that the Tribal component of the Federal-State-Tribal partnership is not receiving support commensurate with the expectations levied on it by the Federal government and many of the States. It also is noted that primary funding for two comprehensive nationwide studies of ICWA implementation has come, not from the Federal department responsible for administration of the Act--the Department of the Interior--but from the Department of Health and Human Services (DHHS).[1]

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[1] The first of these studies was conducted by the American Indian Law Center and CAS Associates in Albuquerque, New Mexico, under a grant from two DHHS programs: the Office of Policy Development in the Administration for Children, Youth and Families (ACYF), and the Administration for Native Americans. The final report for that project is entitled Indian Child Welfare Impact and Improvement under P.L. 95-608 and P.L. 96-272. The second comprehensive nationwide assessment is the present study, funded by the Children's Bureau in ACYF and the Bureau of Indian Affairs.

Many steps need to be taken by many parties to further the implementation of the Indian Child Welfare Act and Public Law 96-272, thereby bringing the Nation closer to achievement of the goals presented at the beginning of this report that serve our national policy regarding Indian child welfare. This chapter presents recommendations for action by Federal, State and Tribal governments. As the recommendations suggest, the Federal department responsible for administration of the Indian Child Welfare Act--the U.S. Department of the Interior--and specifically the department's Bureau of Indian Affairs, needs to take action to:

1. be sure that States and State courts are aware of the Indian Child Welfare Act and the breadth of its applicability;

2. provide comprehensive procedural guidelines that communicate expectations and assist States and localities that are unclear about effective implementation strategies;

3. set minimum standards for State compliance with the Act;

4. implement mechanisms to monitor State performance; and

5. provide clarification on points of confusion within the Act.

Recommendations for the Department of Health and Human Services encourage continuation and expansion of its efforts to:

1. support implementation of the Indian Child Welfare Act through communications with State child welfare agencies;

2. support training and technical assistance to public child welfare agencies on effective service delivery strategies for Native American families;

3. support training and technical assistance to tribal and off-reservation Indian program staff on child welfare service delivery, including permanency planning practices and parent and child protections such as those described in the Adoption Assistance and Child Welfare Act;

4. include provisions of the Indian Child Welfare Act in mechanisms that monitor State and local public child welfare agency practices; and

5. support the establishment of on-going national resources to address Indian child welfare issues.

Specific recommendations to meet these and other needs are presented in the following pages.

Recommendations for the Bureau of Indian Affairs

State-to-State consistency in implementation of many aspects of the Indian Child Welfare Act is needed because of the migratory nature of many Indian families. Except for early guidelines for State courts, the development of specific procedures and implementation manuals has been left to individual State programs. The BIA should develop, or contract for the development of, a comprehensive manual for States and State child welfare workers. This manual needs to include specific steps, accompanied by model forms when appropriate, for:

- determining whether or not children who come into contact with the public child welfare system are Indian and are covered by the Indian Child Welfare Act;
- identifying, locating and notifying the child's Indian tribe(s);
- transferring copies of case record and other information when jurisdiction is transferred to a tribe--as part of a case conference whenever possible;
- identifying relatives and pursuing options for relative placements, including the use of off-reservation Indian centers as resources in this task;
- documenting attempts to follow the order of placement preference;
- notifying the Secretary of the Department of the Interior when Indian children are adopted.

This manual for State and local agencies and workers should include, or be supplemented with, information concerning Indian cultures and the implications of that information for service delivery. The needs include information on:

- tribal sovereignty and tribal governments;
- definitions of extended family in various Indian cultures;
- issues and procedures regarding tribal enrollment; and
- the provision of culturally relevant, culturally familiar services to children and families, including resources available to agencies and workers to assist with this task.

In addition to taking responsibility for development of a manual for public agencies, the BIA also needs to establish and communicate standards and minimum requirements for State performance, including data that must be collected and reported. As one State child welfare official told us as that agency's staff compiled data for the mail survey, "To help the BIA monitor general trends, they should publish expectations for the types of information they [want] States to collect to monitor compliance with the ICWA." These standards should be communicated in the form of regulations. Topics addressed should include:

- standardized collection and reporting of Indian-specific data on children in care, including date of entry into the child welfare system and substitute care; date(s) of parent and tribe notifications; substitute care placement(s), including race/ethnicity of foster parents and auspices of group facilities; date of discharge from substitute care; and case outcome; and

- records to be kept to document attempts to prevent the need for placement and to follow the order of placement preference.

The BIA should announce procedures for regular collection and evaluation of data compiled by State agencies. Trend data should be published, as should information on exemplary practices in various states. Action should be taken to enforce compliance with the established minimum requirements. The BIA should discuss this matter with DHHS officials to explore ways the latter agency might assist in assuring that public agencies are fulfilling their Congressionally mandated responsibilities.

Regulations governing State court implementation of the Indian Child Welfare Act should be promulgated. Standardized protocols for court-to-court transfer of jurisdiction also need to be established.

The data from local BIA agency child welfare programs regarding permanency planning, family reunification, and expeditious movement of Indian children through substitute care are troubling. The BIA currently is implementing a quality control mechanism that will review casework and administrative practices for adherence to established standards and regulations. This initiative should be pursued vigorously. In addition, the BIA should assess the training and technical assistance needs of its agency social services staff and take steps to address them--either directly, through contract, or in collaboration with DHHS child welfare experts.

At the same time, it must be recognized that the social services staff of BIA agencies frequently consists of one individual with an overwhelming array of responsibilities in addition to child welfare services. The BIA should demonstrate a meaningful commitment to child welfare services by taking steps to adjust this situation. Two suggestions made by field study respondents should be among the options examined. These are to separate the operation of the General Assistance program from the delivery of child welfare services at the staff level, and to relieve hands-on BIA social workers from voluminous administrative duties. The dedicated efforts of many BIA field staff for many years with inadequate resources also should be recognized.

The BIA should provide, or support the provision of, information, training, and technical assistance for tribal leaders and councils, tribal court judges and tribal child welfare staff on implications of the Indian

Child Welfare Act for tribes. All need a clear understanding of tribes' rights and responsibilities under the Act. While many topics need to be covered, particular concerns include:

- tribes' rights to decline transfer of jurisdiction over child custody proceedings; and
- specific procedures to be followed when a tribe believes that provisions of the Indian Child Welfare Act have been overlooked or ignored.

A manual for tribal officials outlining information and procedures regarding ICWA implementation is desirable. While this manual will be different from the one developed for public agencies, it is essential that the procedures outlined in the two documents with respect to public-tribal communications and interactions be precisely complementary. A standardized procedure should be included for tranferring case-related information at the time that a case is transferred from State to tribal jurisdiction, or the reverse. A case conference should be one of the recommended practices.

Resources should be made available to tribes to assist in their pursuit of legal redress. Currently, because they lack funds to send tribal attorneys to courts in other states and to pursue appeals, tribes are being prevented from taking jurisdiction over some child custody proceedings. Protection of the legal rights of Indian tribes, parents and children should be assured, regardless of their financial resources.

Training and technical assistance on a comprehensive range of service delivery topics must be made available to tribal child welfare programs. Because tribal programs are at various stages of development, it should be expected that they will choose to take advantage of those opportunities that correspond to their own situations at the time. Permanency planning, case documentation, and case flow monitoring are among the topics that may be relevant to many programs. Periodic needs assessments should be undertaken to identify others.

Resources also should be made available to tribes for the development of culturally embedded services. Many tribal social workers have obtained extensive social work education and training, although in Anglo-oriented settings. Assistance in pursuing effective casework objectives with Indian families through culturally familiar practices would be valuable.

The contributions that child and family services programs of off-reservation Indian centers can make to the provision of both public and tribal child welfare services should be documented and communicated. Potential roles for these programs include functioning as contacts points for both States and tribes, assisting State courts and agencies in identifying children's tribes and making notifications appropriately, recruiting Indian foster and adoptive homes, supervising cases of children placed in urban care settings under tribal jurisdiction, advising public program staff on cultural matters and linking them with resources, and serving as adoption and foster care placement agencies. Demonstration programs should be funded to provide information on various operating models and their impacts.

Two provisions of the Indian Child Welfare Act were named frequently during the field study as points of confusion. The BIA should seek and publish clarification of both. The first issue is whether or not tribes are to be notified in instances of voluntary substitute care placement or voluntary termination of parental rights. The second is whether or not tribes are to be notified, and to have the option of petitioning for transfer of jurisdiction, if the State decides to seek to terminate parental rights to a child and the tribe had declined to accept jurisdiction earlier when the subject of custody proceedings was substitute care placement, not permanent severing of family ties.

In 1982, the Association of Administrators of the Interstate Compact on the Placement of Children (ICPC) surveyed a small number of tribes to determine their interest in being able to be parties to the ICPC. Little interest was shown and the matter was not pursued. The BIA should explore with the Association the steps necessary to survey tribes again, this time contacting a much larger sample. If the response is positive, the BIA should assist the Association in pursuing the necessary actions by State legislatures.

As the designated Federal advocate for Native Americans, the BIA should continue to impress upon Congress the clear necessity of providing adequate, stable support for tribal child welfare programs. Tribal capacity building in all areas is a long-standing national commitment, and support for tribes' capacities to care for their children is imperative.

Finally, the BIA and the Department of Health and Human Services should implement mechanisms for exchanging information and coordinating efforts related to child welfare services for Indian children and families. They also should seek to minimize the burdens their respective funding programs place on tribes by coordinating their grant program announcements, application forms and deadlines, and reporting requirements and deadlines. The impact of efforts along these lines made in Fiscal Year 1985 should be assessed, and plans for coordination should be developed accordingly.

Recommendations for the Administration for Children, Youth and Families

Because of its relationship with State child welfare agencies, the Administration for Children, Youth and Families (ACYF) is in an excellent position to support implementation of the Indian Child Welfare Act. Its national leadership role in the refinement and dissemination of effective child welfare case practices and service delivery strategies makes it a natural focal point for many of the training and technical assistance initiatives recommended in this chapter. ACYF should continue and expand its advocacy efforts for Indian child welfare.

Training and technical assistance initiatives for State and local public child welfare staff supported by ACYF should include training on the delivery of culturally relevant services to Native Americans. This should go beyond the general teaching of cultural awareness to incorporate specifics about strategies and methods. Care must be taken, however, to provide information appropriate to the Indian culture(s) in the specific state or part of the country in which a particular training effort is being conducted.

Similarly, efforts to assist State and local public agencies in the recruitment of Indian foster and adoptive families should reflect recognition that standard recruitment strategies may be less effective with Indian populations than strategies built on values and patterns traditional among the Native cultures in the particular geographic area. The contribution that off-reservation Indian centers can make to such efforts should be developed. Demonstration projects should be funded, and distribution of information on recruitment methods should include reports on current efforts around the country that are proving successful.

ACYF should explore mechanisms for monitoring and fostering State compliance with the Indian Child Welfare Act. For example, examination of compliance with ICWA provisions might be incorporated into the existing "427 review" process.

The Indian Child Welfare Act identifies "a foster home licensed, approved, or specified by the Indian child's tribe" as the second preference for the out-of-home placement of Indian children under State jurisdiction. It appears that a number of State agencies will not use tribally approved homes--even those that have been licensed in accordance with tribal standards and procedures--unless they also are licensed by the State. This dual licensing requirement results in duplicated effort. If State standards do not take into account prevailing Indian cultural and social norms, this practice also may be culturally discriminatory. States, on the other hand, may assert that this policy is necessary to protect the State because of its potential liability if harm comes to a child while in a placement under State jurisdiction. The apparent conflict of interests in this situation needs to be addressed and a specific policy position or recommendation communicated to States and tribes.

ACYF should support expanded availability of training and technical assistance for tribes and off-reservation centers on child welfare issues. This should be available not only to child welfare staff, but also to tribal councils seeking to expand their understanding of this human service area.

ACYF should continue to identify topics related to Indian child welfare as priority areas for the Coordinated Discretionary Funds Program. It also should make a more systematic effort to notify Indian organizations when relevant Requests for Proposals or grant announcements are issued.

Most of the non-monetary resources related to Indian child welfare services are local or regional. National resources are needed. In addition to the ten child welfare resource centers already in place, ACYF should establish a National Center for Indian Child Welfare that includes, at a minimum, legal, social services, and adoption components. It should serve public, tribal, off-reservation and BIA agencies, addressing issues related to the Indian Child Welfare Act and the delivery of services to Indian families and children. The functions of the Center should include training activities, materials collection and development, and identification and transfer of technological innovations. It should be required to coordinate its programming with the other centers across the country.

ACYF also should support the establishment of a permanent national Indian adoption exchange funded under a long-term contract. One responsibility of the exchange should be to assist State agencies in locating extended family members of children needing adoptive families.

Problems affecting the transfer of jurisdiction that arise from the movement of Canadian and Mexican Indians into the United States and American Indians into those countries need to be addressed. Some tribes and States are working out their own agreements with those countries, but the Federal government should conclude agreements to which all Federally recognized tribes are party. Current ACYF efforts to negotiate such an agreement with Mexico should continue, and similar efforts should be undertaken with Canada.

As the designated Federal advocate for child welfare, ACYF should join with the BIA in making clear to Congress the implications of unpredictable, inadequate, piecemeal funding for the quality of tribal child welfare programs.

Recommendations for Other Department of Health and Human Services Agencies

Chemical dependency, and particularly alcohol addiction, is a pervasive problem in many Native American communities and is a significant primary or underlying factor in the disruption of many Native American families. The Department of Health and Human Services, as the parent agency of the Alcohol, Drug Abuse and Mental Health Administraton, the Office of Substance Abuse Prevention, the National Institute on Alcohol Abuse and Alcoholism, the National Institute on Drug Abuse, and the Indian Health Service, should facilitate the transfer of expertise in the field of chemical dependency to the Indian child welfare field.

The first step in this regard by DHHS should be the creation of an interagency working group that includes Native Americans as both members and consultants. This group should examine the state of the substance abuse prevention and treatment field with respect to the Native American population and develop a research and demonstration agenda with the objective of reducing alcohol and other drug abuse among Native Americans by measurable amounts. In addition, DHHS should support the widespread dissemination of general and Native American-specific prevention and treatment information to State, tribal, BIA and off-reservation child welfare programs.

Program initiatives of the Administration for Native Americans (ANA) in DHHS should place a greater priority on development of tribal capacities in child welfare and other social services. Specifically, ANA should:

- Establish child welfare as a priority area, as has been done with alcoholism and child abuse and neglect.
- Place a stronger emphasis on social services structures in the Social and Economic Development Strategies (SEDS) program.
- Provide funding for tribes to analyze their administrative structures with the aim of creating greater separation of powers to protect the independence and professionalism of child welfare service delivery.
- Continue to coordinate with other DHHS agencies in supporting training efforts for tribal child welfare workers

Recommendations for State Child Welfare Agencies

As stated earlier, implementation of the Indian Child Welfare Act by State child welfare agencies has essentially been left to the individual States. This probably has put agencies in states with smaller Indian populations and few or no tribes at a disadvantage because they have little experience dealing with tribes or Indian issues and few if any identified resources to assist them with the task. Even in states with larger Indian populations, State agency interactions with out-of-state tribes often are difficult because of the many differences among tribes with respect to governmental structures, enrollment criteria, and child welfare programs. In the absence of national standards or guidelines, State agencies must continue to take the initiative in implementing the Act and supporting its intentions. The following recommendations are intended to assist State programs in this task.

Even for states with small Indian populations, technical assistance is available on the range of issues involved in ICWA implementation. Topics on which assistance may be needed include knowing the requirements of the ICWA; establishing procedures for identifying Indian children, determining the applicability of the Act in various cases and notifying tribes; and providing culturally familiar services to Indian families. State agencies should identify their technical assistance needs and obtain the needed assistance. Resources for locating such assistance include the Bureau of Indian Affairs, the Administration for Children, Youth and Families, the Indian Health Service, and off-reservation Indian organizations that are located in many urban centers.

The forms and record-keeping systems used by State and local public child welfare agencies, including family information forms, case record forms, and automated caseload information systems, should include "American Indian/Alaska Native" as a specified and separate race/ethnicity category. An item or question concerning tribal affiliation(s) also should be included, with the instruction that this information must be provided for any child or parent identified as American Indian or Alaska Native.

State child welfare caseload information systems should be structured to enable retrieval of data on Native American children, including the information necessary to monitor compliance with the ICWA's provisions concerning preferences for out-of-home placements.

In three of the states visited for the field study, contact with the State child welfare agency on Indian child welfare matters is facilitated because one individual has been designated specifically as the ICW liaison. This is helpful not only to tribal and off-reservation program representatives in their states, but also and perhaps especially to persons and programs in other states who need to make contact concerning an Indian child or family. Other State child welfare agencies should designate an Indian child welfare advocate or coordinator at the State level. In many states, this probably would involve expansion of an existing position rather than creation of a new one.

State child welfare agencies need to establish strong and specific guidelines for the performance of local programs with respect to the ICWA. Procedural manuals providing step-by-step instructions should be developed or strengthened, and standard forms should be used state-wide.

State agencies should provide training for all public child welfare staff on the Indian Child Welfare Act, on Indian cultural norms related to family functioning and child-rearing practices, and on effective casework with Indian families. This training should be provided to all new staff, and Indian-related topics should be included in each agency's continuing education program.

The majority of Indian children in public substitute care continue to be placed in non-Indian homes. There are many reasons for this. One is that foster home licensing standards in a number of states reflect Anglo cultural preferences that are different from norms and practices of many Indian communities. Such standards are culturally discriminatory. All State agencies should review their foster home licensing standards for compatibility with Indian culture.

Another reason for State agencies' inability to place more Indian children with Indian families is that standard foster and adoptive home recruitment strategies often are not effective in Indian communities. State agencies should explore recruitment methods that build on Indian networks and traditions. Tribes and off-reservation Indian organizations should be viewed as resources for this task.

Many of the children in tribal care whose case records were reviewed for this study had been removed from their homes by State programs and then transferred to the tribe. Most of the case records for these children contained little or no information about the case prior to the transfer. State agency procedural manuals should specify that, when a case is transferred to tribal jurisdiction, a copy of the case record also should be transferred and a case conference should be held.

Implementation of the Indian Child Welfare Act requires actions not only by State and local child welfare agencies, but also by State courts. State child welfare agencies should coordinate efforts related to ICWA implementation with their state's Attorney General's office. Respective responsibilities of court and child welfare staff should be documented and included in procedural manuals, court and child welfare agency services should be coordinated, and joint or cross-training needs should be identified and met.

State child welfare agencies should initiate cross-program training with tribal programs. Workers would benefit from the sharing of expertise and perspectives. In addition, such experiences would aid development of positive State-Tribal working relationships, which were identified by field study respondents as an important factor supporting implementation of the ICWA.

State agencies should initiate cost-accounting training for tribal programs. This training should be required of programs that enter into purchase-of-service agreements with the State and should be made available to other programs.

State agencies should include Native Americans on child welfare-related advisory councils and task forces at the State level and encourage their inclusion on local-level bodies.

Recommendations for Indian Tribal Councils

As tribal governing bodies, tribal councils struggle with important and competing needs confronting insufficient resources. The demands and opportunities for tribes resulting from the Indian Child Welfare Act have focused greater attention on child welfare issues. Many councils have responded with initiatives to strengthen and professionalize their child welfare programs. These efforts should continue. Among the steps councils can take are to:

- Establish tribal children's codes;
- Adopt standards for child welfare staff and services;
- Encourage staff training; and
- Support increased community awareness of the program, of issues such as child abuse and neglect, and of the need for foster and adoptive homes.

As part of their efforts to professionalize their child welfare programs, councils should examine tribal administrative structures and policies related to child welfare program operations. Where necessary, councils should implement separation-of-powers safeguards to restrict the interjection of political considerations and the involvement of elected officials in child welfare casework decisions.

Tribal councils should develop long-range plans for child welfare that coordinate use of various funds and describe the orderly and priority-based expansion of programs and services.

Tribal councils also should support their child welfare and other social services programs in implementing preventive and remedial services that are based on Indian culture and traditions.

In implementing the tribal notification requirement of the Indian Child Welfare Act, State and local public child welfare agencies often have difficulty identifying the appropriate tribe and making notification, particularly when the tribe appears to be in another state. Tribal councils should implement procedures that will facilitate the process. When a tribe receives notification for a child who is not affiliated with the tribe, the designated tribal agency should inform the State agency or court of that fact, rather than making no reply. The tribal agency also should communicate any suggestions it may have concerning the identity of the appropriate tribe(s). The agency could alert the other tribe(s), as well.

Another problem in notification can arise when a tribe has named an individual (e.g., J. Hawk) rather than an office (e.g., Tribal Court Judge) as its "designated agent" for receiving State notifications, and the designated individual has left office. To avoid this problem, tribal councils are encouraged to name offices rather than individuals as designated agents. In addition, if any information--such as name, address or phone number--for a tribe's designated agent changes, the change should be communicated promptly to the State child welfare agency, the BIA, and any off-reservation Indian centers with which the tribal program works. Mechanisms also should be established to ensure that notifications sent in accordance with the outdated information are directed appropriately.

Some tribes apparently do not respond to a State's notification unless they wish to assume jurisdiction over the case. Some State courts, on the other hand, do not conduct non-emergency Indian child custody proceedings until they receive a response to the notification from the tribe. This can leave the child and family in uncertain circumstances for a prolonged period of time. Tribes can help prevent this situation by making a prompt, formal response to all State notifications, whether the tribe is accepting or declining jurisdiction in a particular case.

Delays in tribal responses to State notification sometimes occur because of delays in establishing a child's enrollment status or eligibility for enrollment. Tribal councils should take steps to shorten this process, and to expedite enrollment of eligible children.

Many Indian children have dual or multiple tribal affiliations. Tribal councils across the country should discuss, and develop inter-tribal agreements concerning, the criteria to be applied in determining jurisdiction over inter-tribal children.

Finally, many tribal child welfare programs, operating with limited resources and uncertain funding, are able to provide effective services for tribal children and families because of the dedication of individual staff. Tribal councils should give public recognition to the efforts of these tribal child welfare workers.

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Appendix A

Tribes, BIA Agencies and Off-Reservation Indian Centers Reporting Children in Substitute Care

Listed below are the 95 American Indian tribes, tribal consortia or Alaska Native entities, the 18 Bureau of Indian Affairs agencies, and the 9 off-reservation Indian centers whose substitute care data are reported in Chapter 3. This includes 9 tribes and 2 BIA agencies for which the BIA Division of Social Services provided data on the number of children in care.

In addition to these respondents, 46 tribes, 65 BIA agencies, and 18 off-reservation centers returned forms indicating that they either did not operate child welfare programs or did not have children in substitute care during the reporting period. The BIA Division of Social Services identified another 37 tribes and 4 BIA agencies that had no children in care during that period.

Tribes, Alaska Native Villages, and Consortia

Alabama

Poarch Band of Creek Indians of Alabama

Alaska

Bristol Bay Native Association; Dillingham
Ketchikan Indian Corporation
Native Village of Fort Yukon
Tanana Chiefs Conference; Fairbanks
Tanana Native Council
United Crow Band; Tok

Arizona

Cocopah Tribe of Arizona
Colorado River Indian Tribe of the Colorado River Indian Reservation, Arizona and California
Fort McDowell Mohave-Apache Indian Community, Fort McDowell Band of Mohave Apache Indians of the Fort McDowell Indian Reservation, Arizona
Gila River Pima-Maricopa Indian Community of the Gila River Indian Reservation of Arizona

* Havasupai Tribe of the Havasupai Reservation, Arizona
* Hopi Tribe of Arizona
Kaibab Band of Paiute Indians of the Kaibab Indian Reservation, Arizona
Navajo Tribe of Arizona, New Mexico and Utah
Pascua Yaqui Tribe of Arizona
Quechan Tribe of the Fort Yuma Indian Reservation, Arizona
Salt River Pima-Maricopa Indian Community of the Salt River Reservation, Arizona
* Tohono O'odham Nation of the Sells, Gila Bend and San Xavier Reservations, Arizona
* White Mountain Apache Tribe of the Fort Apache Indian Reservation, Arizona
Yavapai-Apache Indian Community of the Camp Verde Reservation, Arizona

California

Consortium of Coastal Indian Rancherias; Trinidad
Indian Child Welfare Consortium; Escondido
Toiyabe Indian Health Project; Bishop
Woodfords Community of the Washoe Tribe, California

Colorado

Southern Ute Indian Tribe of the Southern Ute Reservation, Colorado, New Mexico and Utah
* Ute Mountain Tribe of the Ute Mountain Reservation, Colorado

Florida

Seminole Tribe of Florida--Dania, Big Cypress and Brighton Reservations, Florida

Idaho

Coeur d'Alene Tribe of the Coeur d'Alene Reservation, Idaho
Nez Perce Tribe of Idaho, Nez Perce Reservation, Idaho

Kansas

Four Tribes Social Services Program; Horton

Maine

Penobscot Tribe of Maine

* Data on number of children in substitute care provided by BIA Division of Social Services.

Michigan

Saginaw Chippewa Indian Tribe of Michigan, Isabella Reservation, Michigan

Minnesota

Grand Portage Band of the Minnesota Chippewa Tribe, Minnesota
Leech Lake Band of the Minnesota Chippewa Tribe, Minnesota
Prairie Island Indian Community of Minnesota Mdewakanton Sioux Indians of the Prairie Island Reservation, Minnesota
Red Lake Band of Chippewa Indians of the Red Lake Reservation, Minnesota
White Earth Band of the Minnesota Chippewa Tribe, Minnesota

Missisippi

Mississippi Band of Choctaw Indians, Mississippi

Montana

Chippewa-Cree Indians of the Rocky Boy's Reservation, Montana
* Northern Cheyenne Tribe of the Northern Cheyenne Indian Reservation, Montana
Confederated Salish and Kootenai Tribes of the Flathead Reservation, Montana

Nevada

* Dresslerville Community of the Washoe Tribe, Nevada
Duckwater Shoshone Tribe of the Duckwater Reservation, Nevada
Fort McDermitt Paiute and Shoshone Tribes of the Fort McDermitt Indian Reservation, Nevada
* Moapa Band of Paiute Indians of the Moapa River Indian Reservation, Nevada
Paiute-Shoshone Tribe of the Fallon Reservation and Colony, Nevada
Pyramid Lake Paiute Tribe of the Pyramid Lake Reservation, Nevada
* Reno-Sparks Indian Colony, Nevada
Shoshone-Paiute Tribes of the Duck Valley Reservation, Nevada
Te-Moak Bands of Western Shoshone Indians of the Battle Mountain, Elko & South Fork Colonies of Nevada
Walker River Paiute Tribe of the Walker River Reservation, Nevada
Yerington Paiute Tribe of the Yerington Colony and Campbell Ranch, Nevada
Yomba Shoshone Tribe of the Yomba Reservation, Nevada

* Data on number of children in substitute care provided by BIA Division of Social Services.

New Mexico

Ramah Navajo Tribe of New Mexico
Pueblo of Jemez, New Mexico
Pueblo of Isleta, New Mexico
Pueblo of Laguna, New Mexico
Pueblo of San Felipe, New Mexico
Zuni Tribe of the Zuni Reservation, New Mexico

North Carolina

Eastern Band of Cherokee Indians of North Carolina

North Dakota

Devils Lake Sioux Tribe of the Devils Lake Sioux Reservation, North Dakota
Standing Rock Sioux Tribe of the Standing Rock Reservation, North Dakota and South Dakota
Three Affiliated Tribes of the Fort Berthold Reservation, North Dakota
Turtle Mountain Band of Chippewa Indians, Turtle Mountain Indian Reservation, North Dakota

Oklahoma

Absentee-Shawnee & Sac and Fox Tribes of Indians of Oklahoma
Cheyenne & Arapahoe Tribes of Oklahoma
Chocktaw Nation of Oklahoma
Citizen Band of Potawatomi Indians of Oklahoma
Fort Sill Apache Tribe of Oklahoma
Kickapoo Tribe of Oklahoma
Kiowa Indian Tribe of Oklahoma
Otoe-Missouria Tribe of Oklahoma
Pawnee Indian Tribe of Oklahoma
Tonkawa Tribe of Indians of Oklahoma
Wichita and Affiliated Tribes of Oklahoma

Oregon

Confederated Tribes of the Siletz Reservation, Oregon
Confederated Tribes of the Umatilla Reservation, Oregon
Confederated Tribes of the Warm Springs Reservation of Oregon

South Dakota

Rosebud Sioux Tribe of the Rosebud Indian Reservation, South Dakota
Sisseton-Wahpeton Sioux Tribe of the Lake Traverse Reservation, South Dakota
Yankton Sioux Tribe of South Dakota

Utah

Ute Indian Tribe of the Uintah & Ouray Reservation, Utah

Washington

Confederated Tribes of the Colville Reservation, Washington
Hoh Indian Tribe of the Hoh Indian Reservation, Washington
Kalispel Indian Community of the Kalispel Reservation, Washington
Nisqually Indian Community of the Nisqually Reservation, Washington
Nooksak Indian Tribe of Washington
Suquamish Indian Tribe of the Port Madison Reservation, Washington
Swinomish Indians of the Swinomish Reservation, Washington
Upper Skagit Indian Tribe of Washington

Wisconsin

Bad River Band of the Lake Superior Tribe of Chippewa Indians of the Bad River Reservation, Wisconsin
Lac du Flambeau Band of Lake Superior Chippewa Indians of the Lac du Flambeau Reservation of Wisconsin
Menominee Indian Tribe of Wisconsin, Menominee Indian Reservation, Wisconsin
Wisconsin Winnebago Indian Tribe of Wisconsin

BIA Agencies

Arizona

* San Carlos Agency; San Carlos
Truxton Canon Agency; Valentine

Idaho

Northern Idaho Agency; Lapwai

* Data on number of children in substitute care provided by BIA Division of Social Services.

Montana

Blackfeet Agency; Browning
Crow Agency; Crow
* Fort Belknap Agency; Harlem
Fort Peck Agency; Poplar

Nebraska

Winnebago Agency; Winnebago

New Mexico

Jicarilla Agency; Dulce
Mescalero Agency; Mescalero
Northern Pueblos Agency; Santa Fe

North Dakota

Turtle Mountain Agency; Belcourt

Oklahoma

Anadarko Agency; Anadarko
Pawnee Agency; Pawnee

South Dakota

Cheyenne River Agency; Eagle Butte
Lower Brule Agency; Lower Brule
Pine Ridge Agency; Pine Ridge

Wyoming

Wind River Agency; Ft. Washakie

* Data on number of children in substitute care provided by BIA Division of Social Services.

Off-Reservation Indian Centers

Arizona

Native Americans for Community Action; Flagstaff
Phoenix Indian Center; Phoenix

California

Urban Indian Child Resource Center; Oakland

Illinois

Children & Family Services Program; Chicago

Michigan

Michigan Indian Child Welfare Agency; Sault Ste. Marie

Montana

The In-Care Network; Billings

New York

North American Indian Club of Syracuse and Vicinity; Syracuse

Washington

Seattle Indian Center--Family Services; Seattle

Wisconsin

Milwaukee Indian Health Center; Milwaukee

Appendix B

Supplemental Data on Native American Children in Substitute Care in 1986

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 [1,2]

Age of Child	U.S. Total	Alabama	Alaska	Arizona [3]	Arkansas	California	Colorado	Connecticut
Total Number [4]...............	7,012	17	895	353	5	587	99	16
Percent:								
Less than 1 Year............	4.5	5.9	9.5	11.0	0	4.8	6.1	0
1 - 3 Years...............	14.8	17.6	13.4	13.3	0	18.7	19.2	12.5
4 - 6 Years...............	16.9	23.5	17.0	19.8	0	19.8	18.2	12.5
7 - 9 Years...............	13.8	23.5	14.9	12.5	20.0	13.6	10.1	12.5
10 - 12 Years...............	13.9	17.6	14.7	6.5	20.0	16.2	9.1	18.8
13 - 15 Years...............	18.3	11.8	15.4	22.7	40.0	15.5	23.2	6.3
16 - 17 Years...............	13.6	0	12.0	11.6	20.0	9.5	11.1	25.0
18 Years or Older...........	3.3	0	3.0	2.5	0	1.5	3.0	12.5
Age Unknown.................	.9	0	.1	0	0	.3	0	0

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 1,2/
(continued)

Age of Child	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number 4/	1	0	17	6	0	77	178	3	0
Percent:									
Less than 1 Year	0	-	0	0	-	2.6	0	0	-
1 - 3 Years	0	-	5.9	0	-	10.4	18.0	33.3	-
4 - 6 Years	0	-	0	0	-	14.3	15.7	0	-
7 - 9 Years	0	-	11.8	0	-	7.8	20.8	0	-
10 - 12 Years	0	-	29.4	16.7	-	11.7	13.5	0	-
13 - 15 Years	100.0	-	35.3	33.3	-	27.3	19.7	0	-
16 - 17 Years	0	-	17.6	33.3	-	26.0	2.8	66.7	-
18 Years or Older	0	-	0	16.7	-	0	9.6	0	-
Age Unknown	0	-	0	0	-	0	0	0	-

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 1,2/
(continued)

Age of Child	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachusetts	Michigan	Minnesota	Mississippi
Total Number 4/	60	0	3	55	10	0	172	625	150
Percent:									
Less than 1 Year	1.7	-	0	1.8	10.0	-	3.5	2.9	2.7
1 - 3 Years	16.7	-	0	18.2	10.0	-	20.9	12.5	13.3
4 - 6 Years	33.3	-	66.7	23.6	20.0	-	21.5	16.6	8.7
7 - 9 Years	10.0	-	33.3	12.7	20.0	-	13.4	11.4	13.3
10 - 12 Years	0	-	0	10.9	0	-	16.3	13.1	21.3
13 - 15 Years	0	-	0	7.3	0	-	12.2	21.8	22.7
16 - 17 Years	0	-	0	18.2	30.0	-	11.0	16.3	18.0
18 Years or Older	0	-	0	7.3	10.0	-	1.2	2.2	0
Age Unknown	38.3	-	0	0	0	-	0	3.2	0

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 1,2/ (continued)

Age of Child	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/	6	478	123	74	-	0	118	115	6
Percent:									
Less than 1 Year	0	2.9	2.4	4.1	-	-	2.5	2.6	0
1 - 3 Years	33.3	15.5	22.0	8.1	-	-	11.0	13.0	0
4 - 6 Years	16.7	19.5	6.5	12.2	-	-	14.4	19.1	0
7 - 9 Years	50.0	12.1	11.4	17.6	-	-	16.1	14.8	16.7
10 - 12 Years	0	12.8	9.8	13.5	-	-	16.9	21.7	66.7
13 - 15 Years	0	16.9	24.4	33.8	-	-	20.3	18.3	16.7
16 - 17 Years	0	9.2	16.3	8.1	-	-	13.6	7.8	0
18 Years or Older	0	11.1	7.3	2.7	-	-	5.1	2.6	0
Age Unknown	0	0	0	0	-	-	0	0	0

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 1,2/
(continued)

Age of Child	North Dakota	Ohio	Oklahoma	Oregon	Pennsylvania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 6/	482	5	638	189	-	4	15	656	0
Percent:									
Less than 1 Year	2.5	0	4.7	3.7	-	0	6.7	2.6	-
1 - 3 Years	13.9	0	20.7	11.1	-	0	0	10.7	-
4 - 6 Years	16.6	0	17.7	10.1	-	50.0	6.7	15.5	-
7 - 9 Years	15.6	0	12.7	10.1	-	50.0	20.0	14.8	-
10 - 12 Years	15.4	20.0	13.9	20.1	-	0	6.7	13.4	-
13 - 15 Years	20.5	0	16.8	25.9	-	0	26.7	14.0	-
16 - 17 Years	10.2	60.0	10.0	17.5	-	0	26.7	27.0	-
18 Years or Older	5.2	20.0	1.6	1.6	-	0	6.7	2.0	-
Age Unknown	.2	0	1.9	0	-	0	0	0	-

Table 3-5A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY AGE AND STATE, 1986 1,2/
(continued)

Age of Child	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/	0	128	0	3	140	0	418	85
Percent:								
Less than 1 Year	-	2.3	-	0	3.6	-	5.5	2.4
1 - 3 Years	-	8.6	-	0	15.0	-	16.7	11.8
4 - 6 Years	-	17.2	-	100.0	20.0	-	14.1	17.6
7 - 9 Years	-	12.5	-	0	22.1	-	13.2	18.8
10 - 12 Years	-	18.0	-	0	15.0	-	10.5	10.6
13 - 15 Years	-	19.5	-	0	16.4	-	21.1	22.4
16 - 17 Years	-	20.3	-	0	7.1	-	15.6	14.1
18 Years or Older	-	1.6	-	0	.7	-	2.2	2.4
Age Unknown	-	0	-	0	0	-	1.2	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

4/ Includes only those children for whom age was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-1.

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 [1,2]

Reason for Placement	U.S. Total	Alabama	Alaska	Arizona [3]	Arkansas	California	Colorado	Connecticut
Total Number [4]...............	7,270	13	972	327	5	593	99	16
Percent Placed for:								
Abuse, Molestation..........	13.2	7.7	23.5	17.7	20.0	20.7	4.0	25.0
Neglect.....................	37.3	53.8	50.7	26.9	60.0	41.1	0	25.0
Abandonment.................	8.8	23.1	4.5	15.0	0	21.6	5.1	6.3
Parent Substance Abuse......	14.3	0	8.4	16.8	0	1.2	10.1	25.0
Hardship, No Housing........	1.0	7.7	.6	1.5	0	0	0	0
Other Parent Condition......	3.4	0	1.0	4.0	0	.7	0	0
Child Status Offense........	5.0	0	1.3	4.9	0	1.3	1.0	0
Child Substance Abuse.......	2.0	0	1.4	1.8	0	.2	0	0
Other Delinquency...........	3.9	0	3.0	2.1	0	.7	0	0
Child Disability............	2.7	0	.7	4.6	20.0	1.3	0	18.8
Other Reason................	3.2	0	3.3	3.4	0	4.4	0	0
Reason Unknown..............	5.1	7.7	1.4	1.2	0	6.7	79.8	0

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 1,2/
(continued)

Reason for Placement	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number 4/...............	1	0	17	6	0	118	178	3	0
Percent Placed for:									
Abuse, Molestation..........	100.0	-	11.8	16.7	-	4.2	14.6	0	-
Neglect......................	0	-	47.1	83.3	-	22.0	36.5	100.0	-
Abandonment.................	0	-	0	0	-	0	12.4	0	-
Parent Substance Abuse......	0	-	0	0	-	6.8	7.3	0	-
Hardship, No Housing........	0	-	0	0	-	0	0	0	-
Other Parent Condition......	0	-	0	0	-	.8	3.4	0	-
Child Status Offense........	0	-	35.3	0	-	3.4	12.9	0	-
Child Substance Abuse.......	0	-	0	0	-	38.1	2.2	0	-
Other Delinquency...........	0	-	0	0	-	11.9	5.1	0	-
Child Disability............	0	-	0	0	-	.8	1.1	0	-
Other Reason................	0	-	5.9	0	-	0	2.8	0	-
Reason Unknown..............	0	-	0	0	-	11.9	1.7	0	-

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 1,2/
(continued)

Reason for Placement	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachu-setts	Michigan	Minnesota	Missis-sippi
Total Number 4/..............	60	0	3	55	10	0	172	627	150
Percent Placed for:									
Abuse, Molestation..........	16.7	-	100.0	16.4	40.0	-	7.0	10.4	2.7
Neglect.....................	60.0	-	0	29.1	40.0	-	30.2	24.4	33.3
Abandonment.................	10.0	-	0	20.0	0	-	5.8	6.5	0
Parent Substance Abuse......	0	-	0	9.1	0	-	6.4	12.4	58.0
Hardship, No Housing........	0	-	0	3.6	0	-	1.7	.3	1.3
Other Parent Condition......	5.0	-	0	5.5	20.0	-	1.2	12.1	.7
Child Status Offense........	0	-	0	0	0	-	1.7	4.5	2.0
Child Substance Abuse.......	6.7	-	0	0	0	-	0	2.6	0
Other Delinquency...........	0	-	0	3.6	0	-	2.3	7.5	0
Child Disability............	0	-	0	0	0	-	0	9.1	2.0
Other Reason................	1.7	-	0	1.8	0	-	43.6	3.5	0
Reason Unknown..............	0	-	0	10.9	0	-	0	6.7	0

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 1,2/
(continued)

Reason for Placement	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/...............	6	537	123	90	-	0	118	115	154
Percent Placed for:									
Abuse, Molestation..........	16.7	11.5	19.5	6.7	-	-	4.2	12.2	14.9
Neglect.....................	33.3	45.3	41.5	26.7	-	-	22.0	20.9	57.8
Abandonment.................	16.7	2.0	0	14.4	-	-	11.9	13.0	7.8
Parent Substance Abuse......	0	18.4	2.4	22.2	-	-	39.8	24.3	0
Hardship, No Housing........	0	.7	0	2.2	-	-	0	.9	0
Other Parent Condition......	0	1.1	0	2.2	-	-	2.5	3.5	0
Child Status Offense........	0	13.0	11.4	6.7	-	-	7.6	1.7	0
Child Substance Abuse.......	0	.7	.8	7.8	-	-	1.7	.9	0
Other Delinquency...........	0	4.3	4.9	1.1	-	-	2.5	7.8	9.1
Child Disability............	0	1.7	0	5.6	-	-	5.9	0	.6
Other Reason................	33.3	.7	0	0	-	-	1.7	14.8	9.7
Reason Unknown..............	0	.4	19.5	4.4	-	-	0	0	0

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 1,2/
(continued)

Reason for Placement	North Dakota	Ohio	Oklahoma	Oregon	Pennsylvania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/	482	5	911	202	-	4	15	314	0
Percent Placed for:									
Abuse, Molestation	12.9	0	6.9	8.4	-	100.0	40.0	7.6	-
Neglect	33.8	40.0	51.9	24.8	-	0	0	35.7	-
Abandonment	9.1	0	3.3	18.8	-	0	33.3	4.5	-
Parent Substance Abuse	18.0	0	17.8	2.5	-	0	0	34.1	-
Hardship, No Housing	1.0	0	1.4	1.5	-	0	0	1.9	-
Other Parent Condition	4.4	0	1.3	13.9	-	0	0	2.2	-
Child Status Offense	5.6	0	9.0	5.4	-	0	0	4.8	-
Child Substance Abuse	.6	0	1.0	2.5	-	0	0	1.3	-
Other Delinquency	3.7	20.0	1.0	4.5	-	0	0	5.4	-
Child Disability	3.5	0	.7	16.3	-	0	0	1.3	-
Other Reason	0	0	.2	1.5	-	0	26.7	1.0	-
Reason Unknown	7.3	40.0	5.5	0	-	0	0	.3	-

Table 3-6A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY REASON FOR PLACEMENT AND STATE, 1986 1,2/
(continued)

Reason for Placement	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/	0	128	0	3	140	0	433	65
Percent Placed for:								
Abuse, Molestation	-	6.3	-	100.0	15.7	-	9.9	21.5
Neglect	-	35.9	-	0	38.6	-	22.4	1.5
Abandonment	-	11.7	-	0	22.1	-	16.4	9.2
Parent Substance Abuse	-	11.7	-	0	11.4	-	11.1	67.7
Hardship, No Housing	-	1.6	-	0	0	-	3.2	0
Other Parent Condition	-	.8	-	0	0	-	9.2	0
Child Status Offense	-	2.3	-	0	4.3	-	3.9	0
Child Substance Abuse	-	4.7	-	0	1.4	-	2.8	0
Other Delinquency	-	23.4	-	0	1.4	-	6.5	0
Child Disability	-	.8	-	0	.7	-	3.2	0
Other Reason	-	.8	-	0	2.9	-	0	0
Reason Unknown	-	0	-	0	1.4	-	11.3	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

4/ Includes only those children for whom reason for placement was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-1.

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 1,2/

Length of Time in Care	U.S. Total	Alabama	Alaska	Arizona 3/	Arkansas	California	Colorado	Connecticut
Total Number 4/...............	6,367	17	102	279	5	591	99	16
Percent in Care:								
Less than 6 Months..........	23.6	11.8	20.6	26.9	80.0	20.3	42.4	31.3
6 - 11 Months..............	16.1	17.6	40.2	22.9	20.0	18.3	14.1	6.3
12 - 23 months..............	16.4	17.6	9.8	16.8	0	19.1	12.1	18.8
24 - 35 Months..............	11.6	0	12.7	12.9	0	14.7	7.1	18.8
36 - 59 Months..............	10.8	17.6	7.8	3.6	0	12.4	8.1	0
60 Months or Longer.........	15.6	0	5.9	13.3	0	14.0	16.2	25.0
Length of Time Unknown......	5.8	35.3	2.9	3.6	0	1.2	0	0

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 [1,2]
(continued)

Length of Time in Care	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number [4]..............	1	0	17	6	0	77	178	3	0
Percent in Care:									
Less then 6 Months..........	0	-	0	0	-	63.6	20.8	0	-
6 - 11 Months.............	0	-	29.4	0	-	22.1	3.9	33.3	-
12 - 23 months.............	100.0	-	23.5	0	-	10.4	9.0	0	-
24 - 35 Months.............	0	-	17.6	0	-	0	9.6	0	-
36 - 59 Months.............	0	-	11.8	0	-	3.9	12.9	0	-
60 Months or Longer.........	0	-	17.6	100.0	-	0	43.8	66.7	-
Length of Time Unknown......	0	-	0	0	-	0	0	0	-

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 1,2/
(continued)

Length of Time in Care	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachu-setts	Michigan	Minnesota	Missis-sippi
Total Number 4/	60	0	3	55	10	0	172	621	130
Percent in Care:									
Less than 6 Months	26.7	-	0	30.9	0	-	29.7	32.7	7.7
6 - 11 Months	13.3	-	100.0	12.7	10.0	-	19.8	17.4	19.2
12 - 23 months	21.7	-	0	18.2	40.0	-	24.4	16.3	13.8
24 - 35 Months	18.3	-	0	14.5	30.0	-	12.2	8.5	22.3
36 - 59 Months	10.0	-	0	3.6	0	-	9.3	8.1	32.3
60 Months or Longer	10.0	-	0	20.0	20.0	-	4.7	13.5	4.6
Length of Time Unknown	0	-	0	0	0	-	0	3.5	0

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 1,2/
(continued)

Length of Time in Care	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/...............	6	478	123	88	-	0	118	115	187
Percent in Care:									
Less than 6 Months..........	0	12.1	69.9	13.6	-	-	30.5	20.9	24.1
6 - 11 Months..............	50.0	1.9	13.8	9.1	-	-	7.6	16.5	9.6
12 - 23 months.............	0	2.5	.8	26.1	-	-	16.1	28.7	13.9
24 - 35 Months.............	16.7	19.9	0	4.5	-	-	11.9	14.8	14.4
36 - 59 Months.............	0	24.9	0	15.9	-	-	6.8	7.8	15.0
60 Months or Longer.........	33.3	38.7	0	22.7	-	-	27.1	11.3	23.0
Length of Time Unknown......	0	0	15.4	8.0	-	-	0	0	0

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 1,2/
(continued)

Length of Time in Care	North Dakota	Ohio	Oklahoma	Oregon	Pennsylvania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/	482	5	649	185	-	4	15	670	0
Percent in Care:									
Less than 6 Months	28.8	0	15.3	31.9	-	0	6.7	23.3	-
6 - 11 Months	12.4	20.0	14.9	11.9	-	0	13.3	26.9	-
12 - 23 months	15.8	60.0	16.5	21.1	-	50.0	0	20.4	-
24 - 35 Months	13.7	0	10.0	9.7	-	50.0	0	8.8	-
36 - 59 Months	11.4	0	10.2	5.9	-	0	80.0	8.5	-
60 Months or Longer	12.7	20.0	8.0	16.2	-	0	0	11.8	-
Length of Time Unknown	5.2	0	25.1	3.2	-	0	0	.3	-

Table 3-7A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY LENGTH OF TIME IN CARE AND STATE, 1986 [1,2]
(continued)

Length of Time in Care	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number [4]...............	20	128	0	3	136	0	428	85
Percent in Care:								
Less than 6 Months..........	5.0	24.2	-	0	11.8	-	14.7	30.6
6 - 11 Months..............	30.0	29.7	-	0	2.9	-	16.8	16.5
12 - 23 months..............	15.0	8.6	-	0	33.8	-	19.6	21.2
24 - 35 Months..............	20.0	10.9	-	0	14.0	-	6.8	15.3
36 - 59 Months..............	10.0	9.4	-	33.3	10.3	-	7.0	2.4
60 Months or Longer.........	20.0	9.4	-	66.7	27.2	-	13.6	14.1
Length of Time Unknown......	0	7.8	-	0	0	-	21.5	0

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[1] Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

[2] For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

[3] Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

[4] Includes only those children for whom length of time in care was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-1.

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 1,2/

Type of Placement	U.S. Total	Alabama	Alaska	Arizona 3/	Arkansas	California	Colorado	Connecticut
Total Number 4/	7,974	17	898	751	5	574	99	16
Percent in:								
Foster Home	73.2	82.4	73.5	38.1	60.0	88.0	76.8	56.3
Non-final Adoptive Home	3.7	17.6	3.7	16.1	0	1.4	1.0	12.5
Group Home	6.8	0	10.6	.5	0	4.7	6.1	12.5
Child Care Institution, Secure Facility	6.4	0	.8	31.3	0	3.0	0	0
Residential Treatment	3.6	0	5.2	7.9	20.0	0	14.1	12.5
Independent Living	.5	0	0	1.7	0	0	2.0	6.3
Other Setting	4.2	0	.9	2.4	20.0	1.7	0	0
Setting Unknown	1.6	0	5.3	0	0	1.2	0	0

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 [1,2]
(continued)

Type of Placement	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number [4]...............	1	0	17	6	0	81	105	3	0
Percent in:									
Foster Home.................	100.0	-	58.8	16.7	-	80.2	79.0	66.7	-
Non-final Adoptive Home.....	0	-	5.9	0	-	2.5	0	0	-
Group Home..................	0	-	5.9	0	-	6.2	0	33.3	-
Child Care Institution, Secure Facility.............	0	-	0	66.7	-	8.6	6.7	0	-
Residential Treatment.......	0	-	11.8	16.7	-	2.5	1.0	0	-
Independent Living..........	0	-	0	0	-	0	1.9	0	-
Other Setting...............	0	-	5.9	0	-	0	4.8	0	-
Setting Unknown.............	0	-	11.8	0	-	0	6.7	0	-

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 1,2/
(continued)

Type of Placement	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachusetts	Michigan	Minnesota	Mississippi
Total Number 6/	60	0	3	55	10	0	172	647	150
Percent in:									
Foster Home	85.0	-	100.0	83.6	70.0	-	83.1	61.5	95.3
Non-final Adoptive Home	1.7	-	0	5.5	20.0	-	1.7	2.5	.7
Group Home	3.3	-	0	5.5	0	-	2.3	17.5	2.0
Child Care Institution, Secure Facility	0	-	0	0	0	-	5.2	8.5	.7
Residential Treatment	8.3	-	0	0	0	-	1.2	3.7	1.3
Independent Living	0	-	0	1.8	10.0	-	.6	0	0
Other Setting	0	-	0	1.8	0	-	5.8	1.2	0
Setting Unknown	1.7	-	0	1.8	0	-	0	5.1	0

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 1,2/
(continued)

Type of Placement	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/...............	6	469	123	102	-	21	118	113	151
Percent in:									
Foster Home.................	50.0	47.5	72.4	71.6	-	76.2	70.3	83.2	70.2
Non-final Adoptive Home.....	0	.4	3.3	6.9	-	0	5.1	7.1	12.6
Group Home..................	0	2.8	8.9	16.7	-	9.5	8.5	2.7	0
Child Care Institution, Secure Facility.............	0	6.4	4.1	1.0	-	9.5	6.8	7.1	11.9
Residential Treatment.......	50.0	0	6.5	3.9	-	0	8.5	0	3.3
Independent Living..........	0	1.7	0	0	-	4.8	0	0	1.3
Other Setting...............	0	41.2	4.9	0	-	0	.8	0	.7
Setting Unknown.............	0	0	0	0	-	0	0	0	0

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 1,2/
(continued)

Type of Placement	North Dakota	Ohio	Oklahoma	Oregon	Pennsylvania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/	482	5	639	238	-	4	15	664	0
Percent in:									
Foster Home	84.9	0	91.9	71.0	-	75.0	46.7	84.3	-
Non-final Adoptive Home	1.2	0	2.3	2.1	-	0	0	1.1	-
Group Home	3.9	0	1.6	16.4	-	0	26.7	5.9	-
Child Care Institution, Secure Facility	6.4	20.0	1.9	.4	-	25.0	20.0	1.1	-
Residential Treatment	1.5	0	1.7	8.4	-	0	0	4.5	-
Independent Living	0	20.0	0	.4	-	0	0	0	-
Other Setting	.2	40.0	0	1.3	-	0	6.7	1.5	-
Setting Unknown	1.9	20.0	.6	0	-	0	0	1.7	-

Table 3-8A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY SUBSTITUTE CARE SETTING AND STATE, 1986 1,2/ (continued)

Type of Placement	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/...............	0	156	0	3	482	0	428	85
Percent in:								
Foster Home.................	-	61.5	-	100.0	84.4	-	76.9	83.5
Non-final Adoptive Home.....	-	0	-	0	.4	-	.9	0
Group Home..................	-	13.5	-	0	9.1	-	8.9	7.1
Child Care Institution, Secure Facility............	-	3.8	-	0	2.5	-	4.4	5.9
Residential Treatment.......	-	1.3	-	0	1.5	-	2.8	3.5
Independent Living..........	-	1.9	-	0	0	-	1.2	0
Other Setting...............	-	17.9	-	0	2.1	-	3.7	0
Setting Unknown.............	-	0	-	0	0	-	1.2	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

4/ Includes only those children for whom substitute care setting was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-1.

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/

Race/Ethnicity of Foster Parents	U.S. Total	Alabama	Alaska	Arizona 3/	Arkansas	California	Colorado	Connect-icut
Total Number 4/..............	4,400	17	1,226	266	3	112	99	9
Percent whose Foster Parents are:								
American Indian/ Alaska Native 5/............	62.6	23.5	44.6	77.1	0	88.4	16.2	11.1
White, not Hispanic.........	18.9	64.7	32.5	8.6	0	8.9	2.0	77.8
Black, not Hispanic.........	.9	11.8	.1	2.6	0	1.8	0	11.1
Hispanic....................	1.1	0	0	5.6	0	0	2.0	0
Asian or Pacific Islander...	0	0	0	0	0	0	0	0
Other Race or Ethnic Category....................	5.4	0	6.9	5.3	0	0	0	0
Race Unknown or Not Reported	11.1	0	16.0	.8	100.0	.9	79.8	0

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/
(continued)

Race/Ethnicity of Foster Parents	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number 4/..............	1	0	10	1	0	16	49	2	0
Percent whose Foster Parents are:									
American Indian/ Alaska Native 5/............	0	-	40.0	0	-	50.0	63.3	0	-
White, not Hispanic.........	100.0	-	0	0	-	6.3	12.2	100.0	-
Black, not Hispanic.........	0	-	0	100.0	-	0	12.2	0	-
Hispanic...................	0	-	0	0	-	0	0	0	-
Asian or Pacific Islander...	0	-	0	0	-	0	0	0	-
Other Race or Ethnic Category...................	0	-	0	0	-	0	0	0	-
Race Unknown or Not Reported	0	-	60.0	0	-	43.8	12.2	0	-

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/
(continued)

Race/Ethnicity of Foster Parents	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachusetts	Michigan	Minnesota	Mississippi
Total Number 4/	23	0	3	46	10	0	87	407	149
Percent whose Foster Parents are:									
American Indian/ Alaska Native 5/	100.0	-	0	37.0	20.0	-	75.9	63.1	91.9
White, not Hispanic	0	-	0	6.5	10.0	-	24.1	1.0	8.1
Black, not Hispanic	0	-	0	0	30.0	-	0	0	0
Hispanic	0	-	0	0	0	-	0	0	0
Asian or Pacific Islander	0	-	0	0	0	-	0	0	0
Other Race or Ethnic Category	0	-	0	0	0	-	0	33.4	0
Race Unknown or Not Reported	0	-	100.0	56.5	40.0	-	0	2.5	0

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/

(continued)

Race/Ethnicity of Foster Parents	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/...............	3	190	89	64	-	0	83	94	0
Percent whose Foster Parents are:									
American Indian/ Alaska Native 5/............	0	83.7	0	96.9	-	-	69.9	34.0	-
White, not Hispanic.........	33.3	15.3	4.5	3.1	-	-	16.9	56.4	-
Black, not Hispanic.........	0	0	0	0	-	-	1.2	5.3	-
Hispanic....................	66.7	0	0	0	-	-	12.0	0	-
Asian or Pacific Islander...	0	0	0	0	-	-	0	0	-
Other Race or Ethnic Category...................	0	1.1	0	0	-	-	0	0	-
Race Unknown or Not Reported	0	0	95.5	0	-	-	0	4.3	-

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/
(continued)

Race/Ethnicity of Foster Parents	North Dakota	Ohio	Oklahoma	Oregon	Pennsylvania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/..............	271	0	211	230	-	0	7	259	0
Percent whose Foster Parents are:									
American Indian/ Alaska Native 5/...........	97.0	-	87.7	37.0	-	-	28.6	76.4	-
White, not Hispanic.........	2.6	-	7.6	37.0	-	-	71.4	21.2	-
Black, not Hispanic.........	0	-	1.4	1.7	-	-	0	.8	-
Hispanic....................	0	-	2.4	.9	-	-	0	1.5	-
Asian or Pacific Islander...	0	-	0	0	-	-	0	0	-
Other Race or Ethnic Category...................	0	-	0	0	-	-	0	0	-
Race Unknown or Not Reported	.4	-	.9	23.5	-	-	0	0	-

Table 3-9A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN FOSTER HOMES BY RACE/ETHNICITY OF FOSTER PARENTS AND STATE, 1986 1,2/ (continued)

Race/Ethnicity of Foster Parents	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/	0	31	0	0	125	0	136	71
Percent whose Foster Parents are:								
American Indian/ Alaska Native 5/	-	67.7	-	-	85.6	-	88.2	64.8
White, not Hispanic	-	32.3	-	-	8.0	-	10.3	35.2
Black, not Hispanic	-	0	-	-	0	-	.7	0
Hispanic	-	0	-	-	6.4	-	0	0
Asian or Pacific Islander	-	0	-	-	0	-	0	0
Other Race or Ethnic Category	-	0	-	-	0	-	.7	0
Race Unknown or Not Reported	-	0	-	-	0	-	0	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

4/ Includes only those children in foster homes for whom race/ethnicity of foster parents was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the numbers in foster homes reflected in Table 3-8.

5/ Child is counted in this category if either parent is Native American.

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/

Case Goal	U.S. Total	Alabama	Alaska	Arizona 3/	Arkansas	California	Colorado	Connect-icut
Total Number 4/	6,280	17	99	274	5	584	99	16
Percent with Goal of:								
Return Home	44.1	41.2	31.3	58.8	80.0	51.7	22.2	31.3
Placement with Relative	11.0	11.8	29.3	13.5	0	7.5	0	6.3
Adoption	9.2	29.4	8.1	6.6	0	14.4	4.0	31.3
Guardianship	1.1	0	0	0	0	8.6	0	0
Long-term Foster Care	16.4	5.9	15.2	10.2	0	13.4	14.1	12.5
Emancipation	4.4	0	8.1	5.1	20.0	1.4	3.0	18.8
Other Goal	6.4	0	6.1	1.1	0	1.9	1.0	0
No Goal Established	7.3	11.8	2.0	4.7	0	1.2	55.6	0

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/
(continued)

Case Goal	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number 4/..............	1	0	17	6	0	80	178	3	0
Percent with Goal of:									
Return Home................	0	-	0	50.0	-	32.5	51.7	33.3	-
Placement with Relative.....	0	-	0	0	-	33.7	7.9	0	-
Adoption...................	0	-	5.9	0	-	10.0	6.7	33.3	-
Guardianship...............	0	-	0	0	-	0	0	0	-
Long-term Foster Care.......	0	-	94.1	0	-	2.5	13.5	0	-
Emancipation...............	0	-	0	50.0	-	2.5	6.2	33.3	-
Other Goal.................	100.0	-	0	0	-	3.7	9.6	0	-
No Goal Established........	0	-	0	0	-	15.0	4.5	0	-

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/

(continued)

Case Goal	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachusetts	Michigan	Minnesota	Mississippi
Total Number 4/	60	0	3	55	10	0	172	628	150
Percent with Goal of:									
Return Home	56.7	-	100.0	60.0	60.0	-	60.5	48.4	94.7
Placement with Relative	13.3	-	0	5.5	0	-	4.1	9.7	2.7
Adoption	11.7	-	0	7.3	20.0	-	21.5	5.3	.7
Guardianship	0	-	0	0	0	-	0	0	0
Long-term Foster Care	10.0	-	0	7.3	20.0	-	4.7	16.7	0
Emancipation	5.0	-	0	20.0	0	-	4.7	2.4	2.0
Other Goal	0	-	0	0	0	-	0	16.9	0
No Goal Established	3.3	-	0	0	0	-	4.7	.6	0

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/ (continued)

Case Goal	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/...............	6	478	123	89	-	0	118	115	154
Percent with Goal of:									
Return Home.................	50.0	14.4	39.8	31.5	-	-	66.1	61.7	38.3
Placement with Relative.....	0	18.2	11.4	13.5	-	-	5.9	1.7	16.9
Adoption....................	16.7	2.3	7.3	12.4	-	-	5.1	13.0	27.9
Guardianship................	0	0	0	0	-	-	0	0	0
Long-term Foster Care.......	0	29.5	25.2	21.3	-	-	7.6	14.8	12.3
Emancipation................	33.3	11.7	5.7	12.4	-	-	15.3	8.7	3.9
Other Goal..................	0	2.3	8.1	5.6	-	-	0	0	0
No Goal Established.........	0	21.5	2.4	3.4	-	-	0	0	.6

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/
(continued)

Case Goal	North Dakota	Ohio	Oklahoma	Oregon	Pennsyl-vania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/...............	310	5	785	197	-	4	15	660	0
Percent with Goal of:									
Return Home................	57.1	20.0	27.3	40.1	-	75.0	6.7	49.4	-
Placement with Relative.....	13.2	20.0	8.9	13.7	-	0	13.3	12.4	-
Adoption...................	6.1	0	7.9	5.6	-	25.0	33.3	15.5	-
Guardianship...............	0	0	.9	0	-	0	0	2.3	-
Long-term Foster Care.......	19.4	20.0	18.7	18.8	-	0	0	14.2	-
Emancipation...............	3.5	20.0	1.2	5.6	-	0	46.7	2.1	-
Other Goal.................	.6	20.0	10.7	9.6	-	0	0	3.0	-
No Goal Established.........	0	0	24.5	6.6	-	0	0	1.1	-

Table 3-10A

PERCENTAGE OF NATIVE AMERICAN CHILDREN IN SUBSTITUTE CARE BY CASE GOAL AND STATE, 1986 1,2/
(continued)

Case Goal	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/..............	0	126	0	3	136	0	414	85
Percent with Goal of:								
Return Home................	-	16.7	-	0	41.2	-	46.9	74.1
Placement with Relative.....	-	7.1	-	0	10.3	-	11.1	16.5
Adoption....................	-	4.0	-	0	11.0	-	8.2	0
Guardianship................	-	0	-	0	0	-	0	0
Long-term Foster Care.......	-	23.8	-	100.0	28.7	-	18.4	4.7
Emancipation................	-	.8	-	0	2.2	-	2.9	4.7
Other Goal..................	-	41.3	-	0	3.7	-	10.1	0
No Goal Established.........	-	6.3	-	0	2.9	-	2.4	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 78 percent of responding programs, reporting date is 6/30/86. For other programs, reporting date ranges from 12/31/85 to 7/30/87.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column. Approximately 200 of these children were initially taken into care in other States.

4/ Includes only those children for whom case goal was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-1.

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 [1,2]

Case Outcome	U.S. Total	Alabama	Alaska	Arizona [3]	Arkansas	California	Colorado	Connecticut
Total Number [4]................	6,068	2	1,295	194	0	256	90	0
Percent:								
Returned Home...............	61.4	100.0	77.2	41.2	-	48.0	8.9	-
Placed with Relative........	11.8	0	8.7	7.7	-	15.2	0	-
Adopted.....................	6.1	0	4.2	37.6	-	11.7	3.3	-
Guardianship Established....	.5	0	0	0	-	1.2	0	-
Emancipated.................	5.2	0	.3	4.1	-	7.4	0	-
Ran Away....................	2.1	0	.2	1.0	-	1.6	0	-
Transferred.................	3.0	0	.1	6.7	-	5.5	0	-
Died........................	.3	0	0	1.0	-	.4	0	-
Other Outcome...............	4.7	0	7.2	0	-	7.0	0	-
Outcome Unknown.............	5.5	0	2.1	.5	-	3.1	87.8	-

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 1,2/
(continued)

Case Outcome	Delaware	District of Columbia	Florida	Georgia	Hawaii	Idaho	Illinois	Indiana	Iowa
Total Number 4/	1	0	7	2	2	73	143	1	0
Percent:									
Returned Home	100.0	-	71.4	0	50.0	45.2	40.6	100.0	-
Placed with Relative	0	-	14.3	100.0	0	34.2	34.3	0	-
Adopted	0	-	0	0	0	6.8	2.1	0	-
Guardianship Established	0	-	0	0	0	0	0	0	-
Emancipated	0	-	0	0	0	8.2	8.4	0	-
Ran Away	0	-	14.3	0	0	0	2.1	0	-
Transferred	0	-	0	0	50.0	4.1	0	0	-
Died	0	-	0	0	0	0	0	0	-
Other Outcome	0	-	0	0	0	0	10.5	0	-
Outcome Unknown	0	-	0	0	0	1.4	2.1	0	-

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 1,2/
(continued)

Case Outcome	Kansas	Kentucky	Louisiana	Maine	Maryland	Massachu-setts	Michigan	Minnesota	Missis-sippi
Total Number 4/	33	0	2	25	0	0	45	807	79
Percent:									
Returned Home	60.6	-	0	64.0	-	-	66.7	65.9	70.9
Placed with Relative	3.0	-	0	24.0	-	-	8.9	12.6	8.9
Adopted	3.0	-	0	0	-	-	4.4	1.6	5.1
Guardianship Established	0	-	0	0	-	-	0	0	0
Emancipated	12.1	-	0	12.0	-	-	2.2	3.5	12.7
Ran Away	0	-	0	0	-	-	0	6.8	0
Transferred	21.2	-	0	0	-	-	13.3	1.0	0
Died	0	-	0	0	-	-	0	0	2.5
Other Outcome	0	-	0	0	-	-	0	4.0	0
Outcome Unknown	0	-	100.0	0	-	-	4.4	4.6	0

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 1,2/

(continued)

Case Outcome	Missouri	Montana	Nebraska	Nevada	New Hampshire	New Jersey	New Mexico	New York	North Carolina
Total Number 4/	0	255	111	70	-	0	86	47	112
Percent:									
Returned Home	-	37.6	45.0	52.9	-	-	61.6	80.9	49.1
Placed with Relative	-	15.7	3.6	20.0	-	-	8.1	6.4	8.0
Adopted	-	1.2	2.7	2.9	-	-	14.0	4.3	19.6
Guardianship Established	-	0	0	0	-	-	0	0	0
Emancipated	-	23.1	7.2	14.3	-	-	8.1	4.3	7.1
Ran Away	-	1.2	0	4.3	-	-	2.3	2.1	.9
Transferred	-	3.1	8.1	5.7	-	-	3.5	0	2.7
Died	-	1.2	0	0	-	-	0	0	0
Other Outcome	-	0	33.3	0	-	-	2.3	2.1	12.5
Outcome Unknown	-	16.9	0	0	-	-	0	0	0

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 1,2/

(continued)

Case Outcome	North Dakota	Ohio	Oklahoma	Oregon	Pennsyl- vania	Rhode Island	South Carolina	South Dakota	Tennessee
Total Number 4/	320	3	187	255	-	0	0	1,027	0
Percent:									
Returned Home	63.7	100.0	50.3	47.5	-	-	-	76.1	-
Placed with Relative	13.1	0	20.9	12.5	-	-	-	7.8	-
Adopted	3.4	0	14.4	4.3	-	-	-	5.8	-
Guardianship Established	0	0	0	0	-	-	-	2.4	-
Emancipated	8.1	0	5.9	5.9	-	-	-	3.1	-
Ran Away	1.6	0	1.1	11.8	-	-	-	.1	-
Transferred	6.6	0	7.5	3.9	-	-	-	3.1	-
Died	0	0	0	.8	-	-	-	.2	-
Other Outcome	1.6	0	0	1.2	-	-	-	1.6	-
Outcome Unknown	1.9	0	0	12.2	-	-	-	2.1	-

Table 3-17A

PERCENTAGE OF NATIVE AMERICAN CHILDREN DISCHARGED FROM SUBSTITUTE CARE BY CASE OUTCOME AND STATE, 1986 1,2/
(continued)

Case Outcome	Texas	Utah	Vermont	Virginia	Washington	West Virginia	Wisconsin	Wyoming
Total Number 4/	0	101	0	1	83	0	309	44
Percent:								
Returned Home	-	20.8	-	100.0	49.4	-	41.4	84.1
Placed with Relative	-	10.9	-	0	16.9	-	17.8	0
Adopted	-	5.0	-	0	3.6	-	6.5	0
Guardianship Established	-	0	-	0	0	-	0	0
Emancipated	-	5.0	-	0	7.2	-	7.8	13.6
Ran Away	-	1.0	-	0	0	-	2.6	0
Transferred	-	2.0	-	0	19.3	-	1.6	0
Died	-	4.0	-	0	2.4	-	.3	2.3
Other Outcome	-	49.5	-	0	0	-	0	0
Outcome Unknown	-	2.0	-	0	1.2	-	22.0	0

1/ Combines all types of programs surveyed: State, Tribal, BIA, and Off-reservation.

2/ For 70 percent of responding programs, reporting year is 7/1/85 - 6/30/86. For other programs, reporting year ranges from 9/1/84 - 8/31/85 to 10/1/86 - 9/30/87. Reporting "year" was more or less than 12 months for 9 percent of reporting programs.

3/ Data for all children under jurisdiction of the Navajo Tribal Court are reported in the Arizona column.

4/ Includes only those children for whom case outcome was reported. Some programs did not provide data on this topic, so the totals in this table may not equal the totals in Table 3-14.